

**Marin City Residents in Need**  
**Community Questionnaire 2003**  
**Summary Report and Key Points of Interest**

**Prepared by the Marin City Community Services District  
For the County of Marin Department of Health & Human Services**

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# The 2003 Marin City Community Questionnaire

In June and July of 2003, approximately 277 Marin City adults participated in the Marin City Community Health Questionnaire, a questionnaire designed through cooperative efforts of ISOJI (community volunteer activist organization), the Community Services District (CSD local government), health advocates serving the community, and concerned residents. The funding was provided through a grant from the Marin County Department of Health and Human Services.

**Survey Structure** -- The survey questions drew upon survey questions utilized in other questionnaires, such as the 2001 Marin Community Health Survey, the Sebastopol Community Health Survey, and the Hunter's Point-Bay View Community Survey. Meetings were held with the leader of the Hunter's Point Assessment team, Karen Pierce, and with the Director of the African American Coalition for Health Improvement and Empowerment, Cynthia Selmar. The meetings fulfilled its purposes with the exchange of information and by incorporating expertise of these organizations into the Marin City Community Questionnaire.

The survey was designed to elicit comprehensive physical and behavioral health information for residents living in the incorporated area of Marin City, California. A primary goal of the questionnaire was to gather information on the "unmet" needs of residents. Questions appearing on the survey asked about what health care services residents were interested in or wanted. Questions also inquired about what general areas of health care service residents had utilized in the past year. The survey questionnaire provided information regarding what health facilities were being used, health status of individuals and families, what residents felt were the most important health services and health problems, what medical care they used in the last year, where they received it, and the reasons they were not receiving services.

The questionnaire utilized a non-probability sample of Marin City residents and therefore results should be interpreted with caution, and cannot be generalized to the Marin City population as a whole. A further description of questionnaire limitations follows.

**Collection of Data** -- Special activities were set up in order to collect survey data from Marin City residents: surveys were passed out at local institutions (e.g., the local Senior and Recreation Centers, the Coffee Shop, Library, local agency offices. Volunteer also went door-to-door to distribute and collect both completed and incompleted surveys. Mini-cookoff's were established at several community locations where surveys were distributed. Surveys were made available to drivers in their vehicles at selected stop signs. Volunteers on foot went into various pockets or gathering places where residents socialized and ask to complete surveys.

**Future use** -- The results of this questionnaire provided an array of useful information to the community, agencies, organizations, PR and image building campaigns and potential stakeholders serving Marin City residents. The report will be an important resource to assist the community and its leadership as they move forward with their vision to develop a wellness service center and a wellness community in a culturally competent (appropriate) manner.

**Special thanks** -- are due to all Marin City residents who participated in this questionnaire and to the volunteers who offered their time and effort to make this questionnaire and report possible. The partnerships that have evolved in the development and implementation of this project will pave the way for future collaborative efforts

# Non-Probability Sample Limitations

A non-probability sample is a sample where the respondents are selected non-randomly by the interviewer. In contrast, a random sample is one where the interviewer ensures that each member of that population has an equal probability of being selected. Random samples are an important foundation of statistics. Unfortunately, at the community level, random samples can be time-consuming, cumbersome, and expensive. Thus, non-probability samples are often utilized to gather exploratory information at the local level, in spite of their statistical limitations and their inability to provide conclusive data about the prevalence of health characteristics in an overall population. A non-probability sample can provide useful information to a community, although less definitive and generalizable, and must be carefully qualified when presenting the findings.

Special activities were set up in order to collect questionnaire data from targeted Marin City residents: surveys were passed out at local institutions (e.g., the local Recreation Center, Childcare centers, the local coffee shop), volunteers went door-to-door to in selected neighborhoods to distribute and collect questionnaires, and information about the local effort was included in the Marin City Newspaper. Still, because surveyors chose respondents on the basis of their availability (e.g., adults who utilize the local Recreation Center), all residents of Marin City did not have the same opportunity of being included in the sample. As a consequence, unknown portions of the population were excluded from this questionnaire (e.g. those who chose not to be surveyed, or whose house was not chosen to be surveyed). Therefore, the extent that this non-probability sample, regardless of its size, actually represents the entire population of Marin City cannot be known. This means that questionnaire results cannot be generalized to the entire Marin City population.

Since survey efforts were concentrated in low-income areas of Marin City, this resulted in a sample population in which low-income residents and African-American residents are disproportionately represented. When comparing the demographic profile of the surveyed population to the demographic profile of Marin City as a whole according to the 2000 U.S. Census, it becomes evident that the population surveyed (greater than 10% of the total adult population of Marin City) is comprised by a greater percentage of African-Americans adults than the overall Marin City population, and a greater percentage of low-income adults than in the overall Marin City population. Again, this means that the population surveyed as part of the Marin City Community Health Survey is not representative of the overall population of the Marin City Community Services District. Response rates are not available due to the fact

that the survey team did not keep track of all its contacts, negative responses, incomplete surveys, and discarded surveys; only complete surveys were included in final analyses.

A primary goal of the questionnaire was to gather statistics on the unmet health needs of low-income residents in Marin City to help the community realize its vision for a local health clinic. While the information from this questionnaire is an important resource to the community in its planning, the data collected as part of Marin City Community Questionnaire does not provide absolute information as to the health needs of the Marin City population, nor does it lend to the estimation of these needs. Questions appearing on the survey questionnaire asked about what health care services residents were interested in or wanted. Questions also inquired about what general areas of health care service Marin City residents had utilized in the past year. *However, the questionnaire did not specifically ask residents what health care services they lack, what chronic conditions they had, what conditions they could not obtain health care for, or what chronic diseases they might be at risk for. As such, the questionnaire is unreliable as a gauge the service needs of residents.*

Respondents came from specific neighborhoods, with the majority from the “bowl” area of Marin City. The bowl, while multi-cultural in nature, including Latino, Asian, and Semite ethnic and language groups, is an area that is predominated by African-Americans.

It should also be noted that a small number of questionnaires were collected from individuals living on house boats (approximately 4 survey respondents). Although these residents are not technically included in the Marin City Community Services District, information collected from these individuals was included in all analyses. Due to the small number of questionnaires collected from house boat residents, it was felt that inclusion of information from these individuals added a small degree of power to questionnaire results without markedly altering these results. For comparison of demographic data from the questionnaire to that from the 2000 U.S. Census of Marin City, Marin City is defined as Census Tract 1290 plus Census Blocks 3000 and 3001 from Census Tract 1281. The inclusion of blocks 3000 and 3001 from Census Tract 1281 was made in order to be consistent with Marin City boundaries as defined by the Community Services District.

In spite of the limitations of non-probability samples, they can provide useful information about a community. A non-probability sample can be used to demonstrate that a particular characteristic or phenomenon occurs in a population or particular group, or that not all individuals in a community manifest a certain trait. For example, in the case of this questionnaire, it was revealed that not all Marin City adults are satisfied with the medical care they are receiving,



and that not all individuals in Marin City are covered by health insurance, although the proportion of Marin City residents unsatisfied with their medical care or without health insurance cannot be accurately ascertained from this questionnaire. A non-probability sample can also be used to describe a particular group in an exploratory way. In this case, the Marin City questionnaire has provided valuable insights about how low-income individuals living in public housing view their health and health care, even though it does not yield data about the proportion of Marin City residents with untreated chronic illnesses. More diverse and inclusive strategies will have to be applied to incorporate other areas of the Marin City Community Services District in the future initiatives.

# SUMMARY - Non-probability Sample Limitations

## *Questionnaire data is not representative of the general Marin City population*

Although volunteers collected questionnaire data from more than 10% of the Marin City adult population (277 adults surveyed in a population of 2279 adults), the results of this questionnaire cannot be generalized to the overall Marin City adult population for the following reasons:

- **Data was collected using a non-probability sample, meaning that not all adults living in Marin City were equally likely to be surveyed.**

While non-probability samples are easier to collect than random samples, in this questionnaire the use of a non-probability sample lead to a participant pool demographically different than the general Marin City population.

- **Questionnaire results reflect the opinions of only those Marin City adults surveyed.**

Because not all Marin City adults were equally likely to be surveyed, results from this questionnaire reflect only the opinions of adults surveyed and cannot be extrapolated to the general Marin City adult population.

- **A small number of questionnaires were collected from adults living on boat homes.**

Although boat home residents are not technically included in the Marin City Community Services District, data from 4 boat homes residents, collected as part of this questionnaire, was included in all analyses.

## *This questionnaire is unreliable as a gauge for service needs*

Data collected as part of this questionnaire does not provide information as to the overall prevalence of health needs of Marin City adults, nor does it lend to the estimation of these needs, for the following reasons:

- **The questionnaire does not describe the health service needs of Marin City residents.**

The questionnaire did not include questions asking what specific health care services are needed, what chronic conditions they had, or what chronic diseases they might be at risk for.

- **Questionnaire questions regarding health care services reflect the interests but not the needs of survey respondents.**

Questions appearing on the questionnaire asked about what health care services residents were interested in or wanted and what areas of health care service participants had used in the past year, rather than unmet needs.

# SUMMARY - Non-Probability Sample Beneficial Aspects

*Despite its several limitations, a non-probability sample is useful for:*

- Reaching hard-to-reach populations ie. individuals who are unlikely to answer a phone survey,
- Documenting that a characteristic or phenomenon occurs within a given group,
- Demonstrating that not all residents manifest a particular trait,
- Detecting relationships among different phenomena.

*The questionnaire provides information about questionnaire respondents that tells us:*

- What health facilities and services these adults are using,
- What health facilities and services they want to see in their community,
- If these adults are covered by medical and/or dental insurance,
- Some reasons why surveyed adults may not be receiving health care.

*The use of a non-probability sample in this questionnaire enables us to:*

- Demonstrate that certain health problems and access limitations occur in Marin City,
- Describe the surveyed population in an exploratory way.

*Information derived from this questionnaire can be used as a reference point to:*

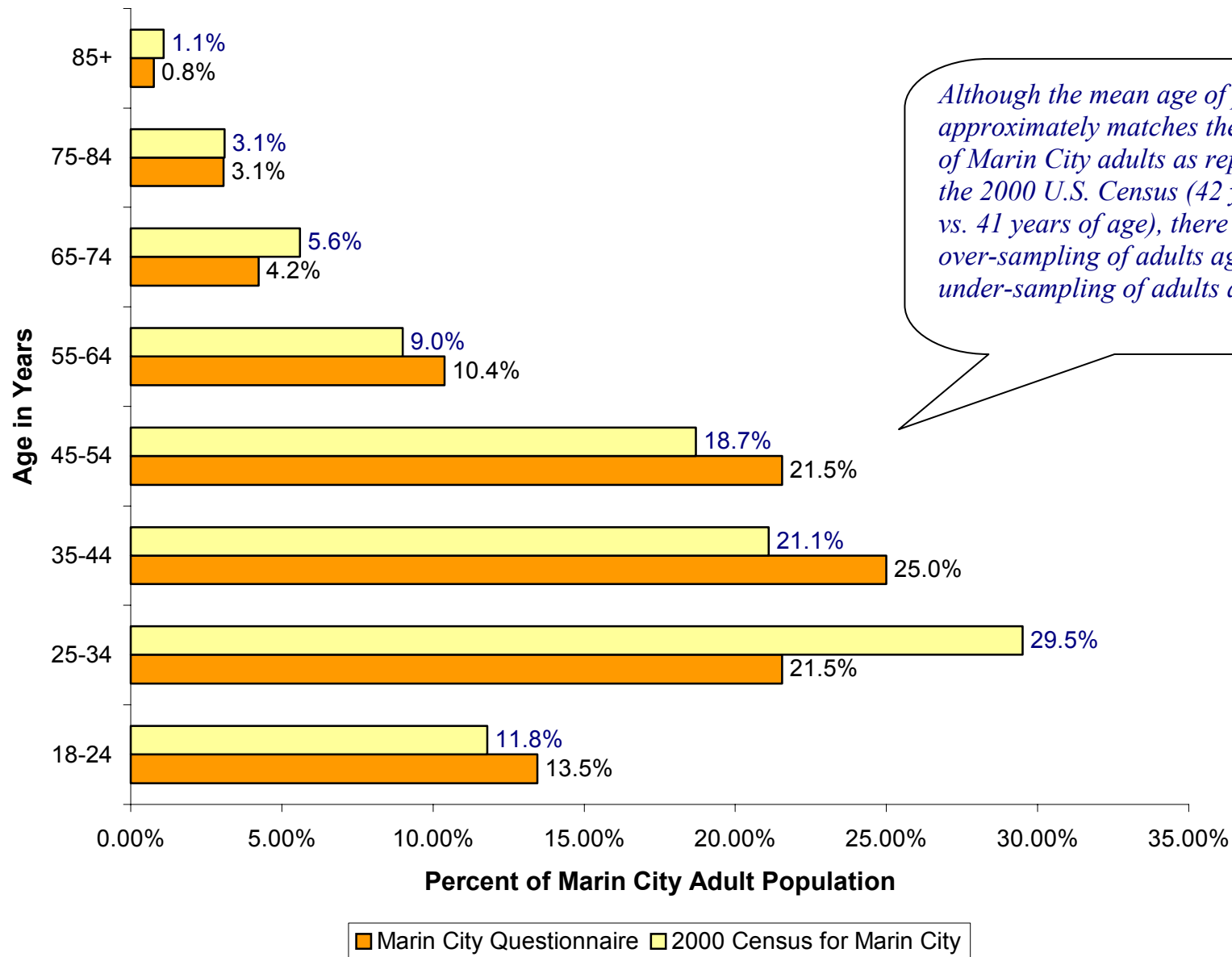
- Shape future needs assessments or community surveys,
- Guide focus group discussions for further description of community interests and identification of community needs.

## **Participant Demographic Data**

# Participant Demographics – and Census Comparisons

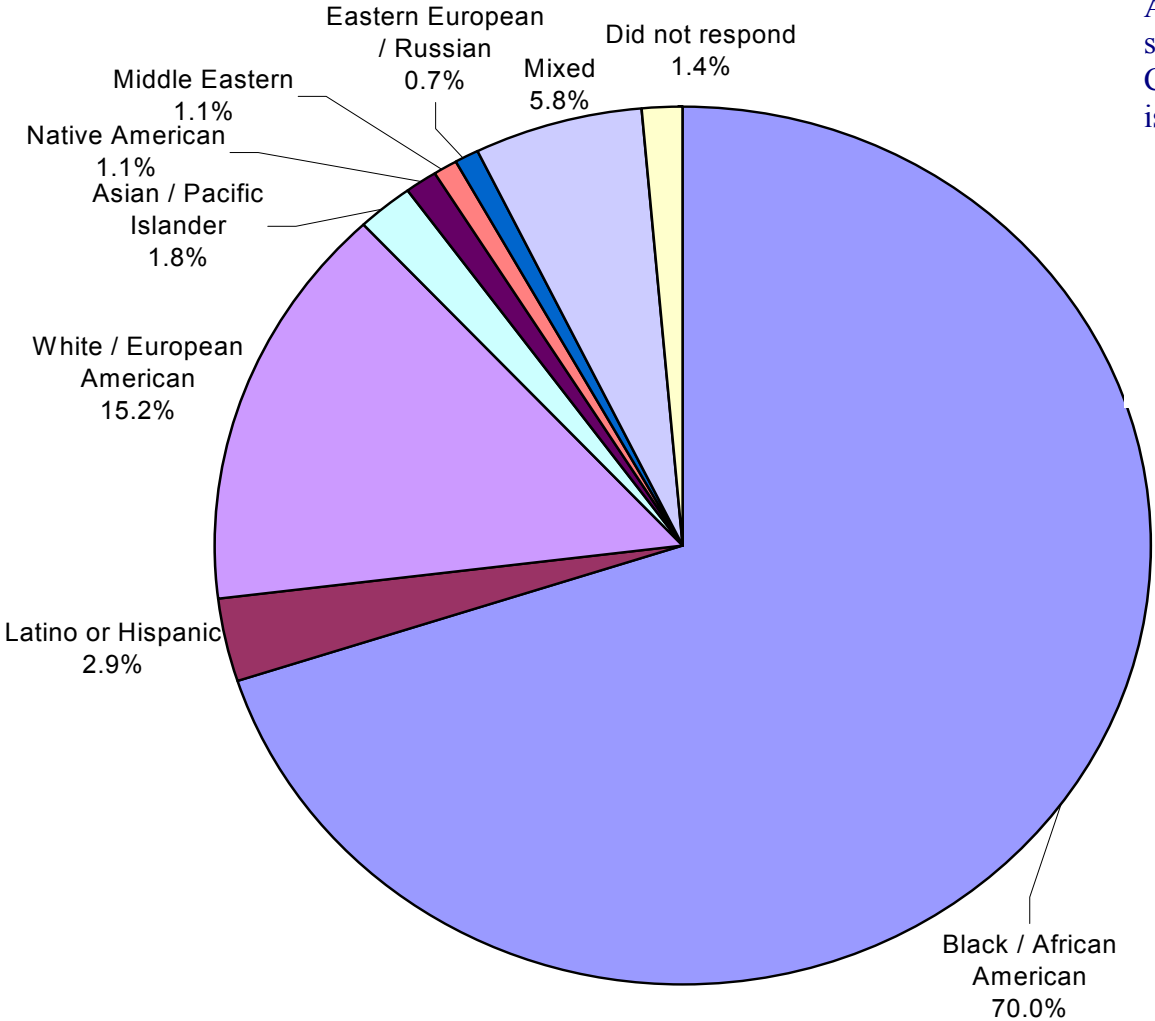
- 70% of Marin City residents surveyed were African-American
  - According to the 2000 U.S. Census, only 33.8% of the Marin City population is African-American – indicating that particular demographic groups of Marin City residents are underrepresented in this survey sample.
- The mean age of surveyed respondents was 42.
  - Compared to the 2000 Census, the survey over-sampled adults age 35-44 and under-sampled adults age 25-34
- 26.7% of participants reported a total household income less than \$8,980,
  - According to the 2000 U.S. Census (for Census Tract 1290, encompassing 85% of the Marin City population), approximately 16.9% of Marin City residents had a household income less than \$10,000 – indicating that the survey over sampled low-income individuals living in Marin City.
- 34.7% of Marin City residents surveyed lived in Public Housing
- 23% of participants reported having lived in Marin City for 30 or more years
- 44% of participants reported being unemployed (includes retirees)

# Age Distribution of Respondents Compared to Census Estimates



# Race / Ethnic Distribution - Respondents Compared to Census 2000

Reported Race/Ethnicity of Surveyed Adults

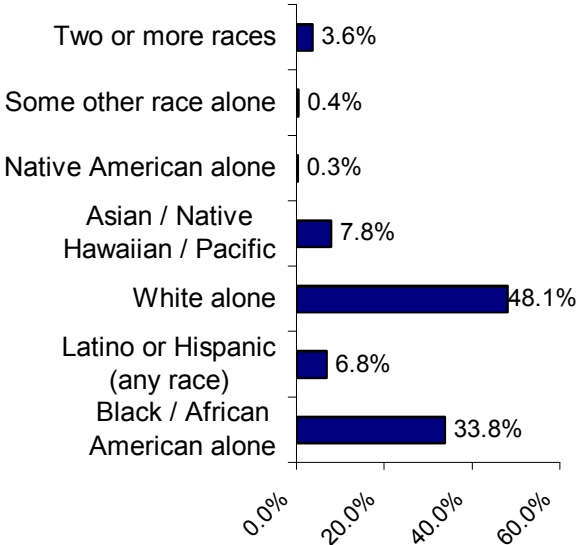


The racial composition of Marin City's population is not accurately represented in this questionnaire. African-Americans were disproportionately surveyed. The true racial composition of the Marin City population, according to the 2000 U.S. Census, is described as being:

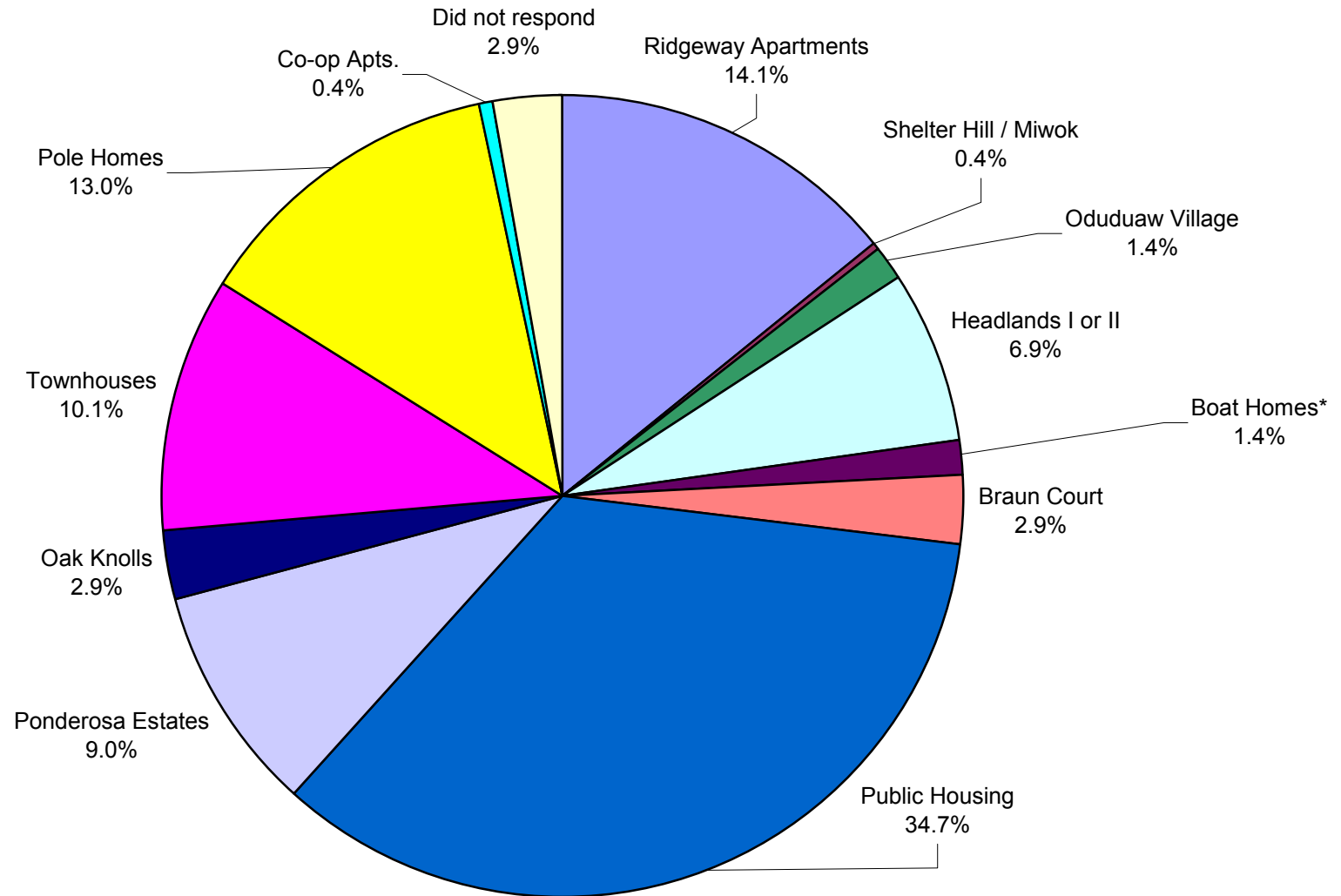
- 33.8% African-American, and
- 48.1% White non-Hispanic (encompassing survey categories of 'White / European American,' 'Middle Eastern,' and 'Eastern European / Russian.')



Census Estimated Race Distribution for Marin City



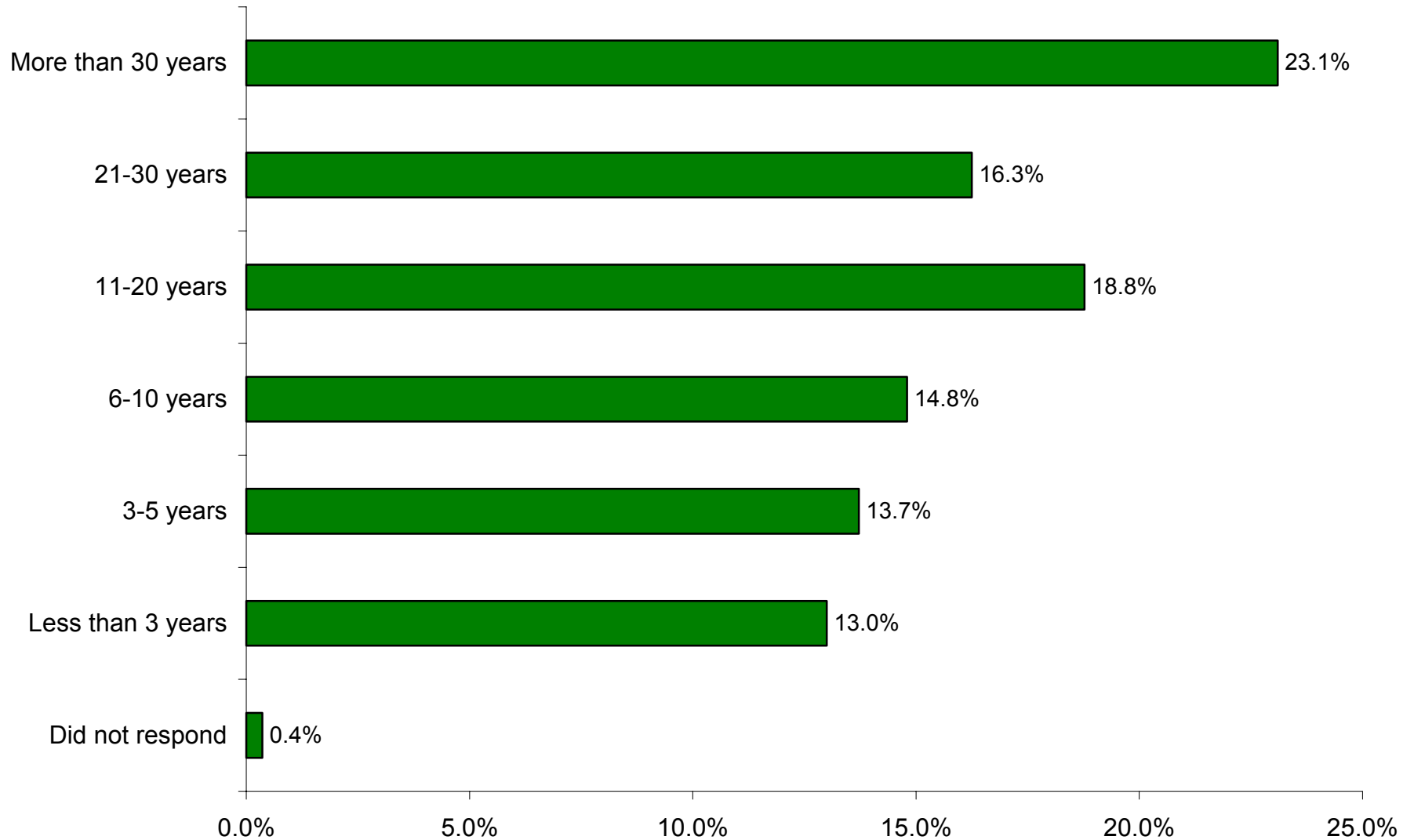
# Neighborhood of Residence Among Marin City Questionnaire Respondents



\*Although boat homes do not fall under the jurisdiction of the Marin City Community Services District, a small number of questionnaires were distributed to adults living in the boat homes.

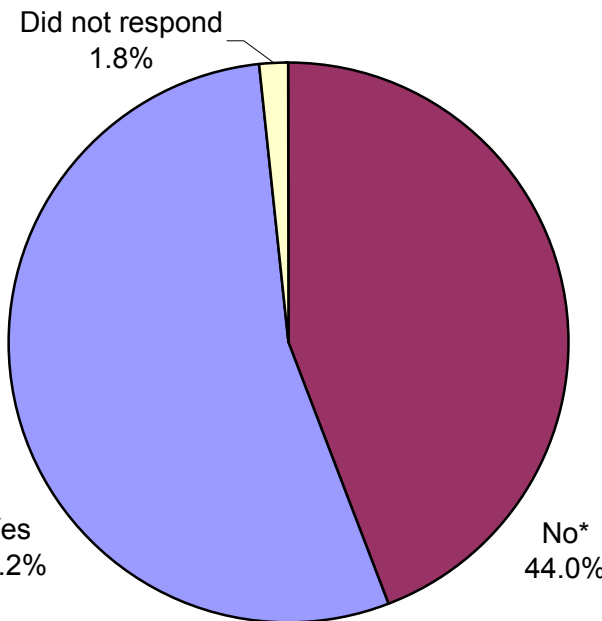


## Length of Residence in Marin City Among Questionnaire Respondents

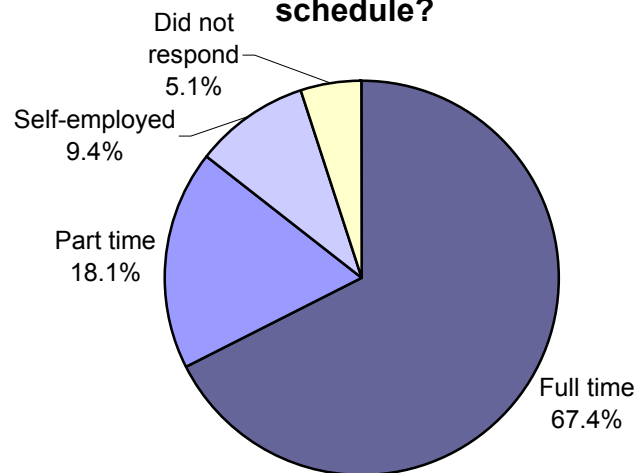


# Employment Status Among Questionnaire Respondents

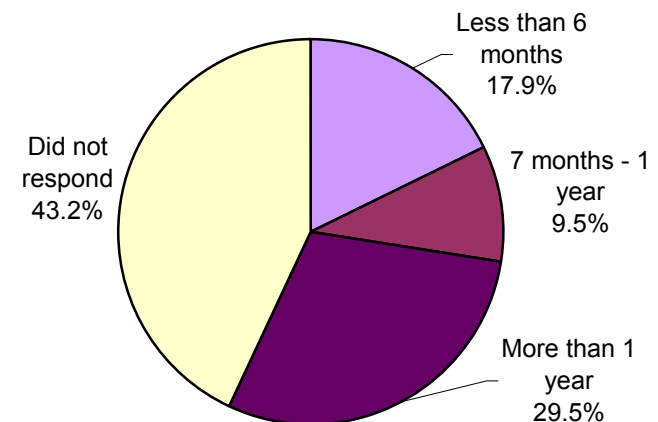
**Are you currently employed?**



**If currently employed, what is your work schedule?**

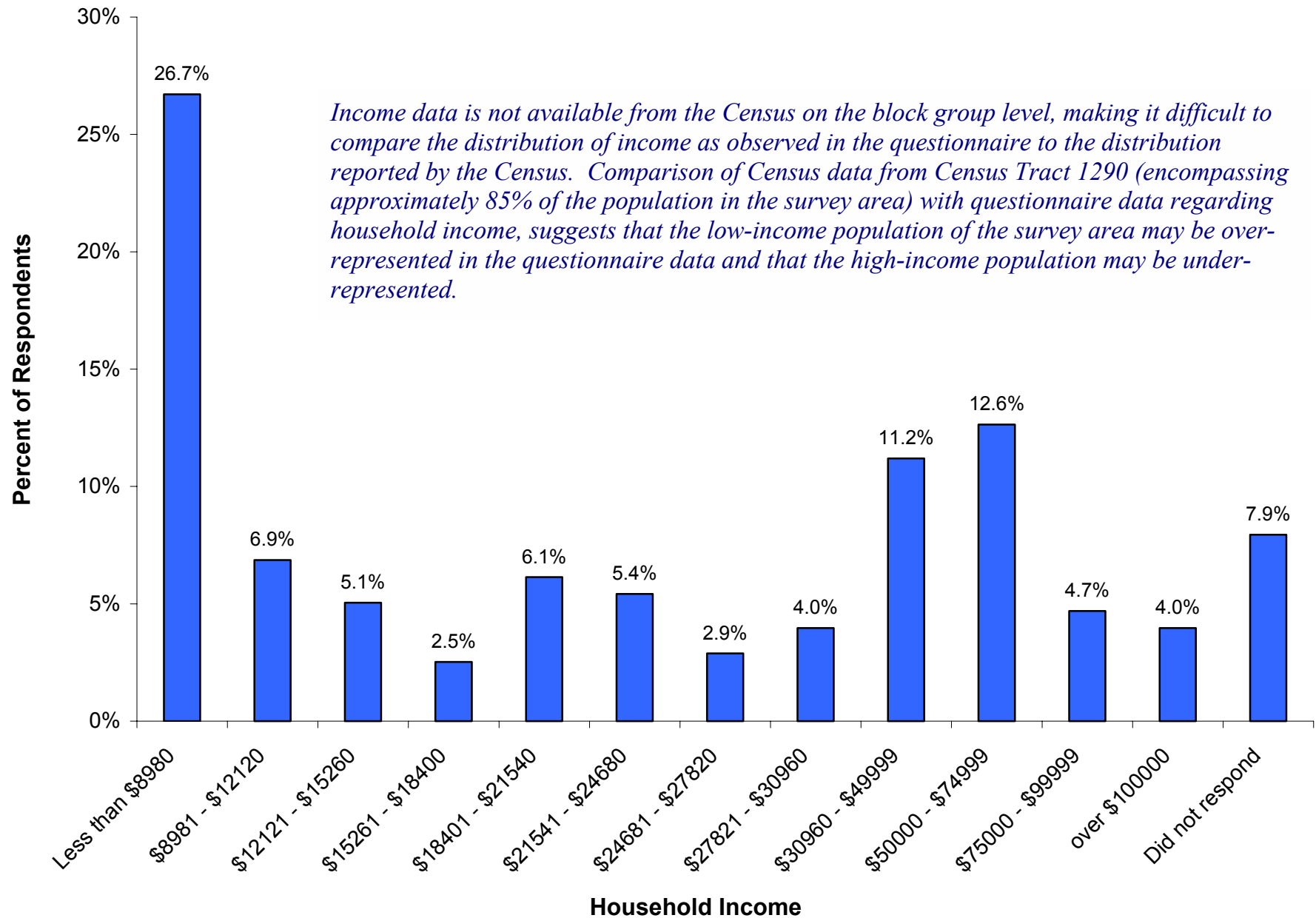


**If currently unemployed, how long have you been without a job?**



\*May include retired individuals.

# Total Household Income Among Surveyed Adults



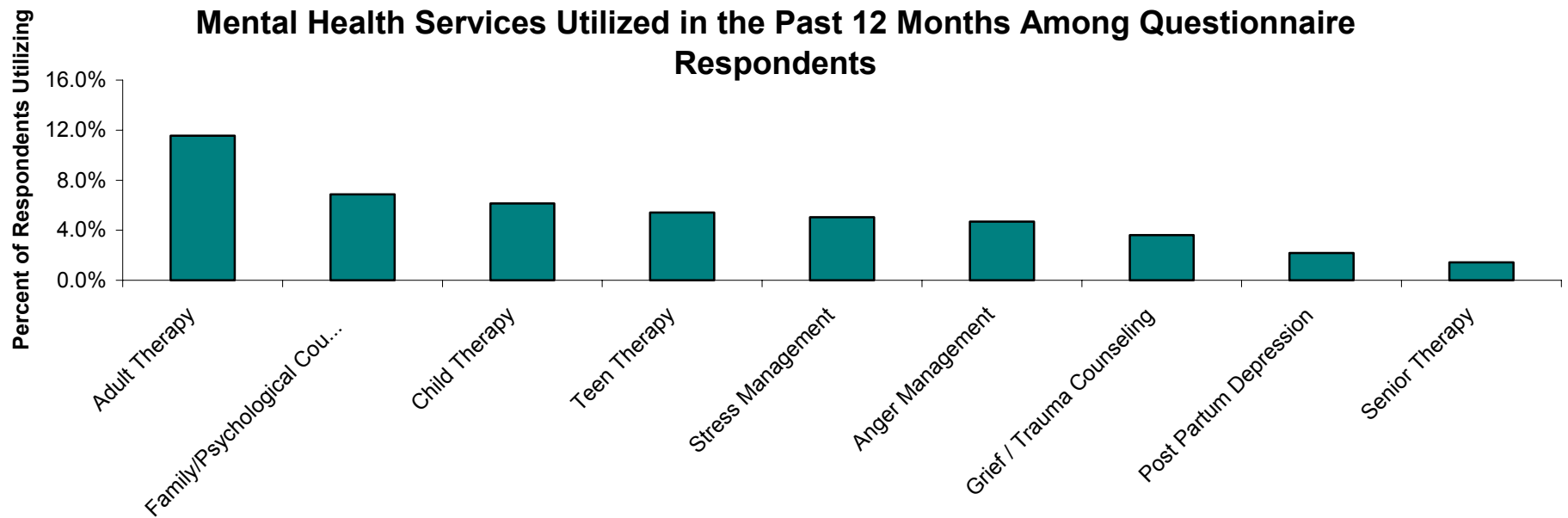
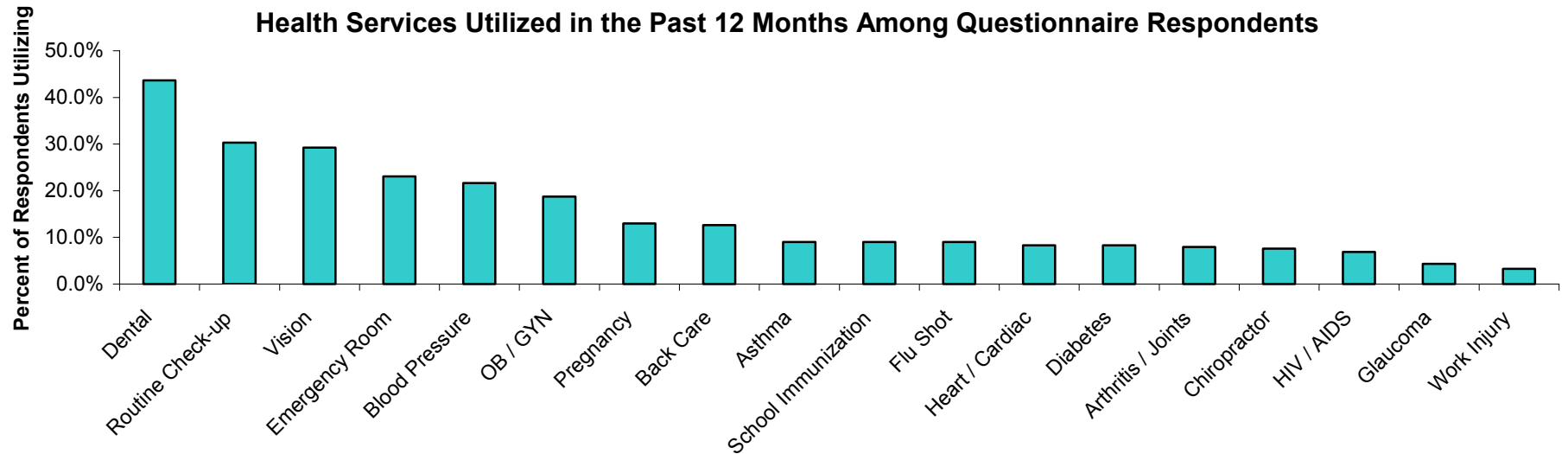
# **Facilities Usage and Health Profile of Surveyed Marin City Residents**

# Facilities Usage and Health Profile of Surveyed Marin City Residents

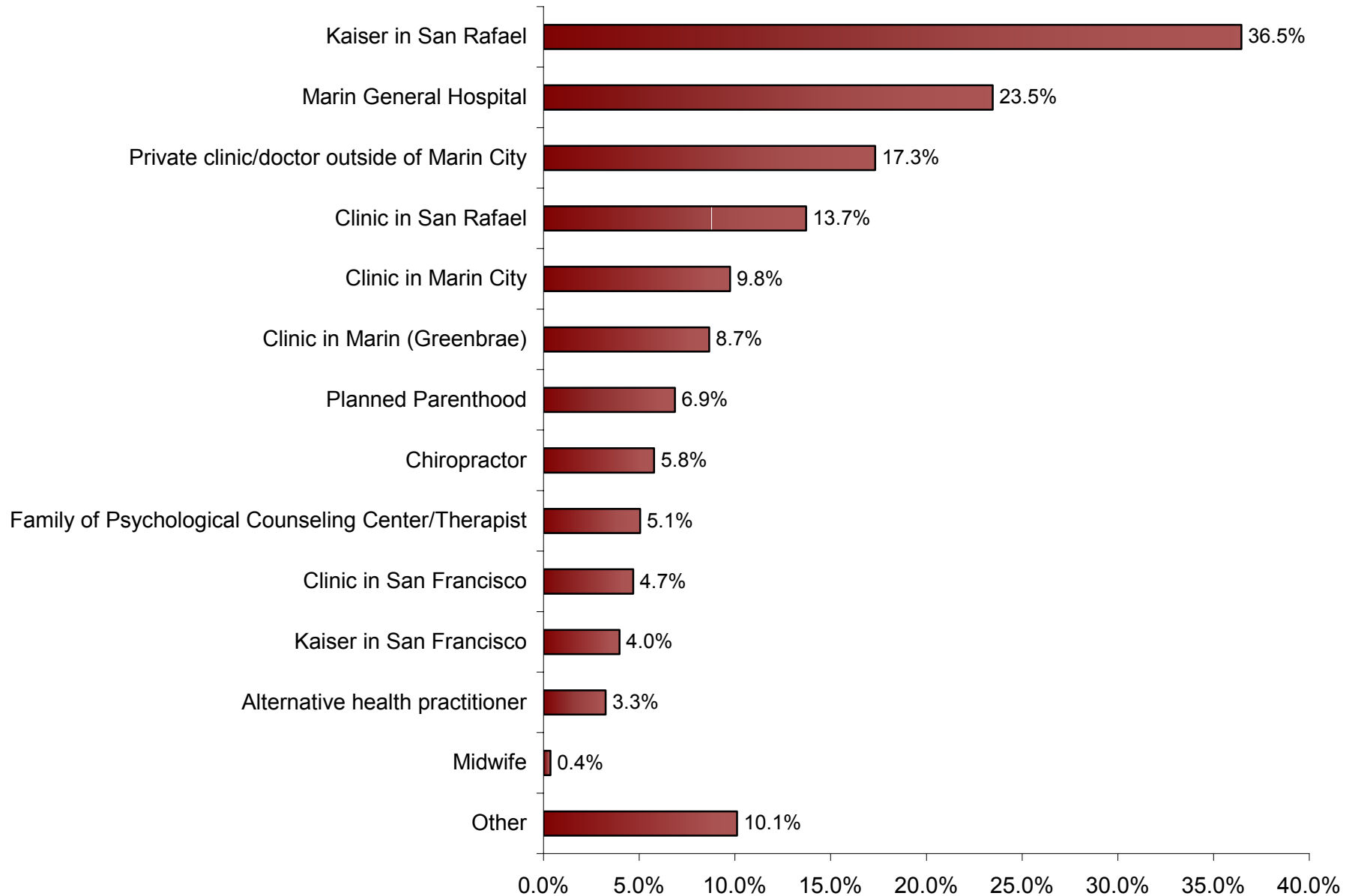
## *Key Points of Interest:*

- Greater than  $\frac{1}{3}$  of the surveyed Marin City adults going to Kaiser in San Rafael for their health needs
- 48% of the surveyed population reported that they had ever canceled, missed, or put off medical, dental, family counseling, or psychological counseling services due to cost
- 78% of respondents reporting having some form of medical insurance, while only 63% reported having any dental insurance and only 54% reported having vision insurance
- 38% of respondents felt that they were overweight, with women more likely to report being overweight than men
- 70% of respondents reported that they, or someone in their home, had been to a dentist in the past year, while only 28% of respondents reported brushing and flossing daily
- 36% of respondents reported having ever experienced domestic violence or relationship violence
- 80% of surveyed Marin City residents said they felt safe in their homes

# Health Services Utilization

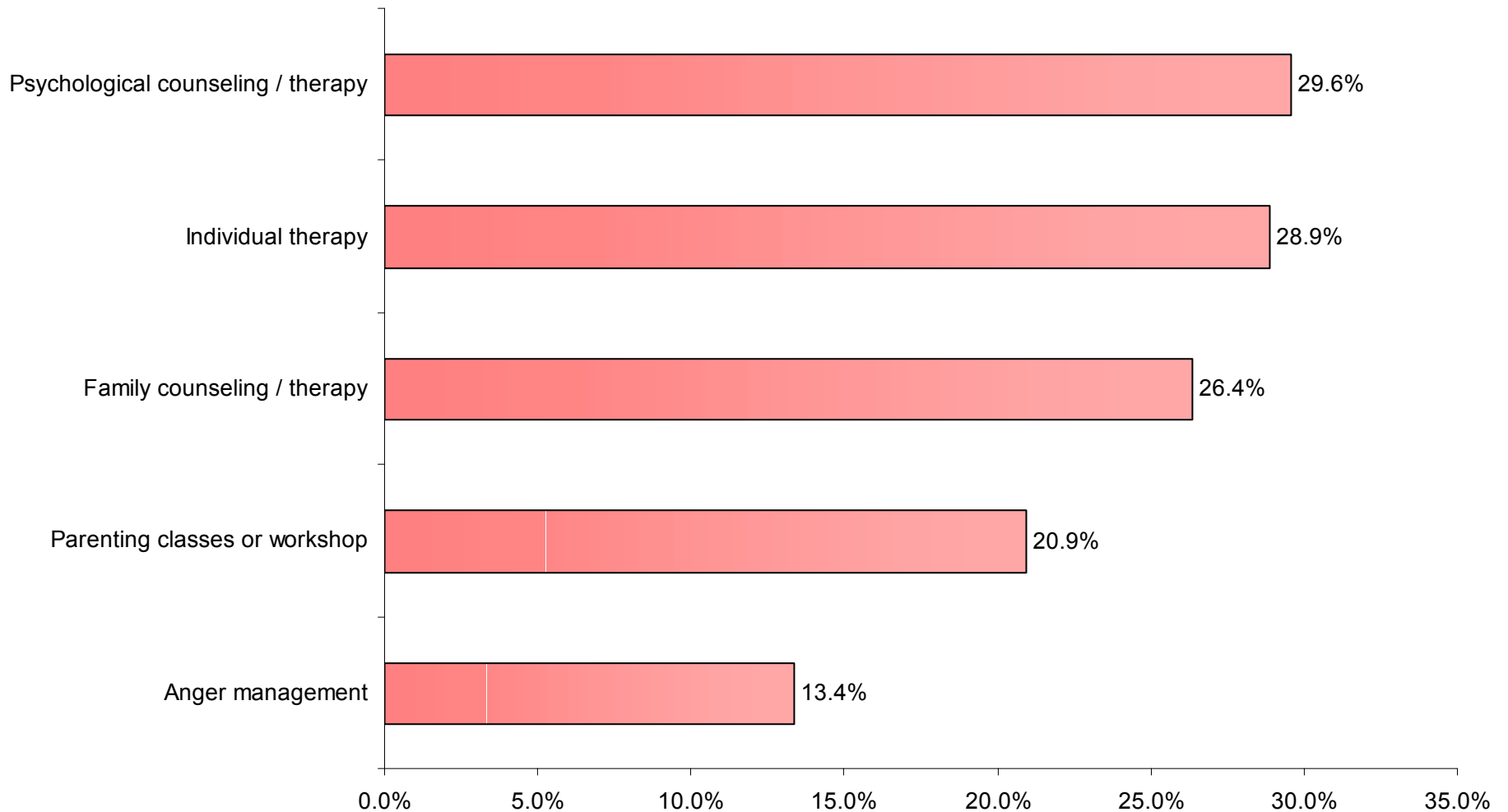


# Local Health Facilities Utilized by Questionnaire Respondents



# Counseling Service Utilization

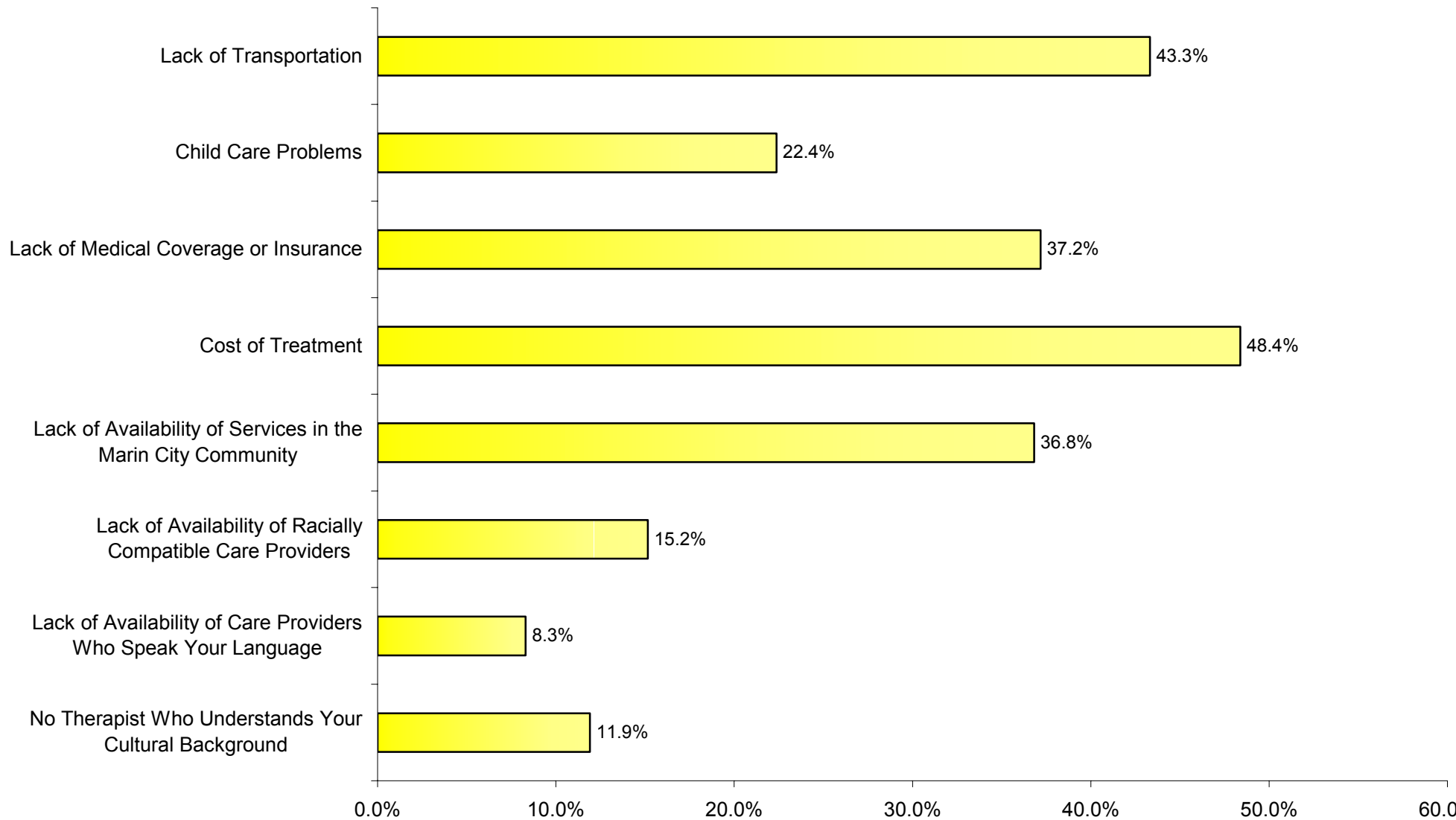
Have you ever benefited from any of the following?



*More than 60% of questionnaire respondents reported that if psychological counseling or family counseling services were located in Marin City they, or someone in their home, would use these services.*



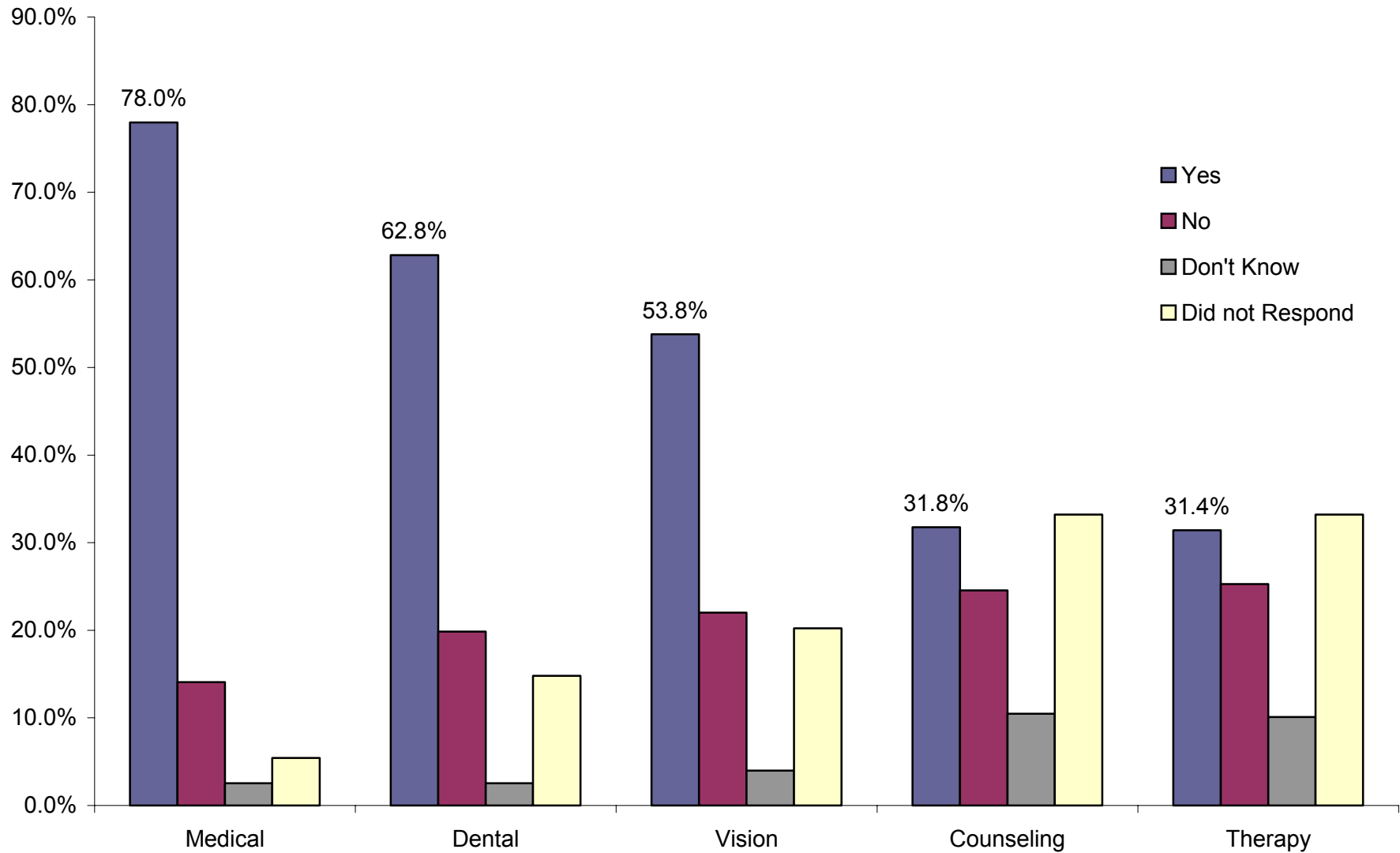
# Reasons for not Receiving Needed Medical, Dental, or Therapy Services



\*Note: Multiple answers allowed. Total does not equal 100%.

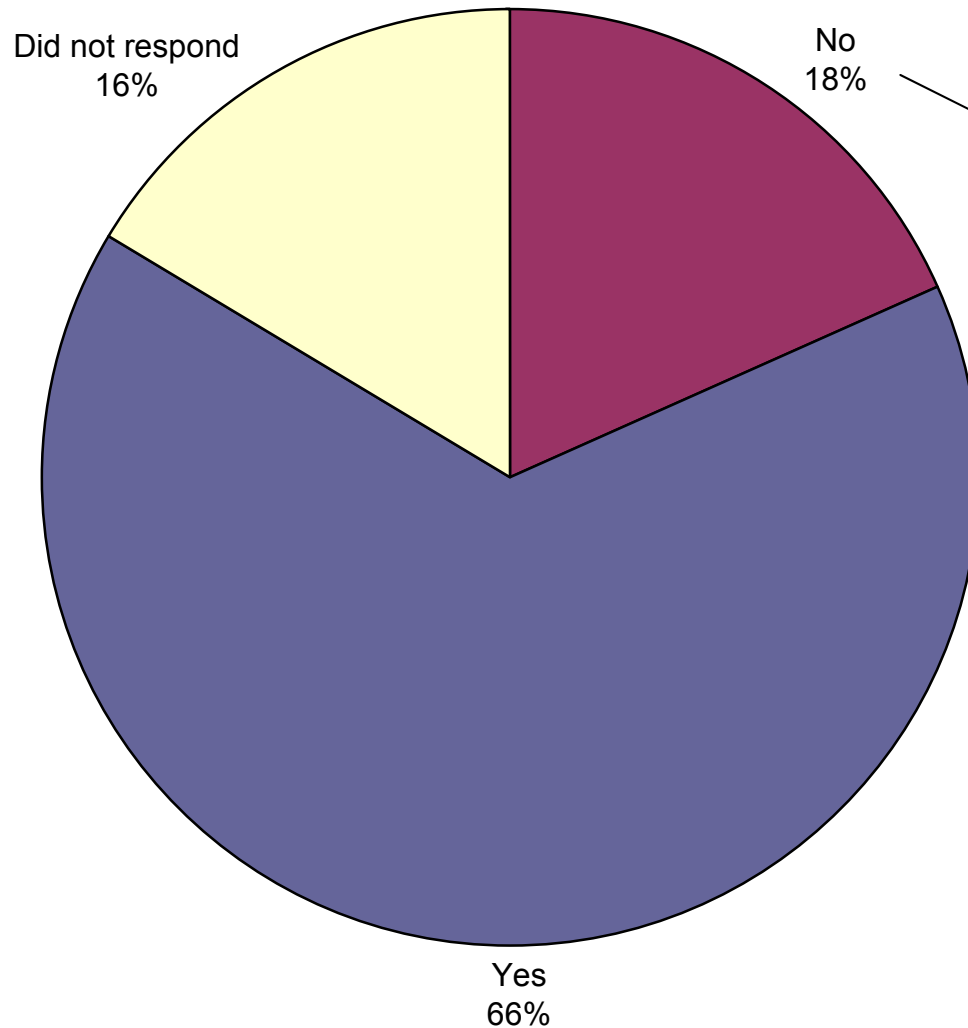
# Health Insurance Coverage

**Are You Currently Covered by a Health Insurance Plan that Covers Any Part of the Following Services?**



# Adequacy of Medical Care

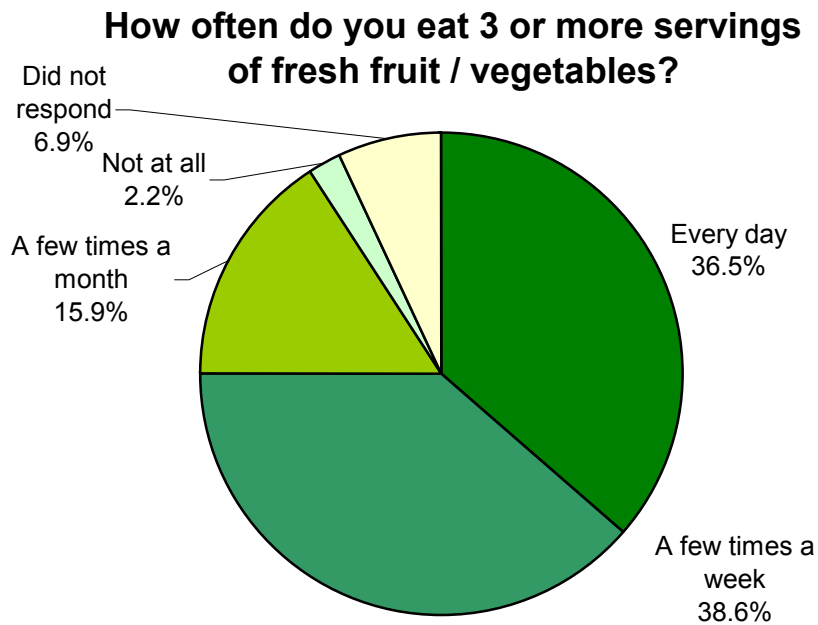
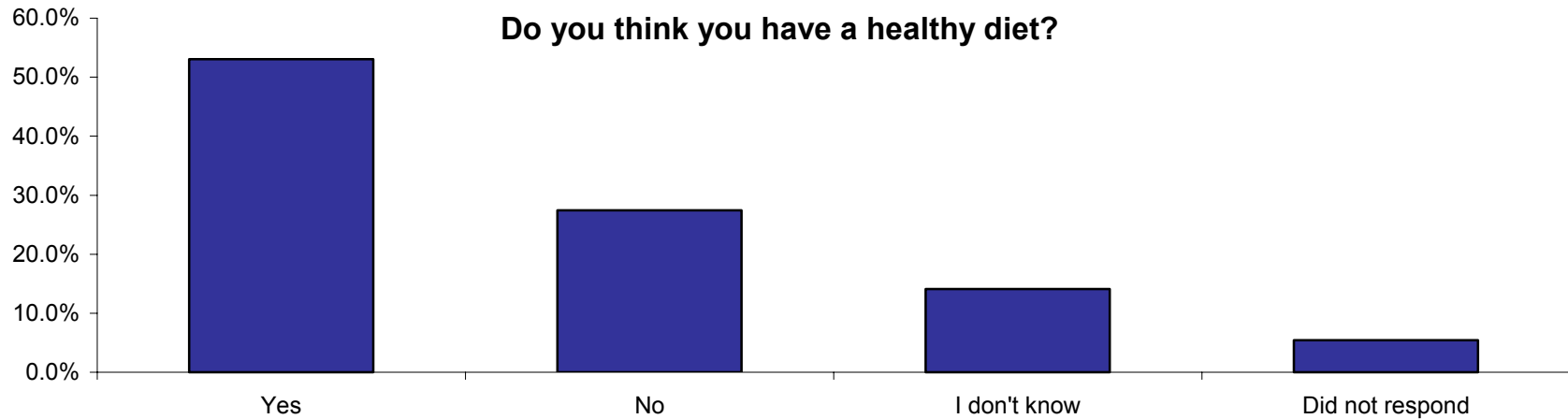
Is the care that you receive meeting your needs?



Among those respondents who reported that the care they received was not meeting their needs, so common reasons as to why were:

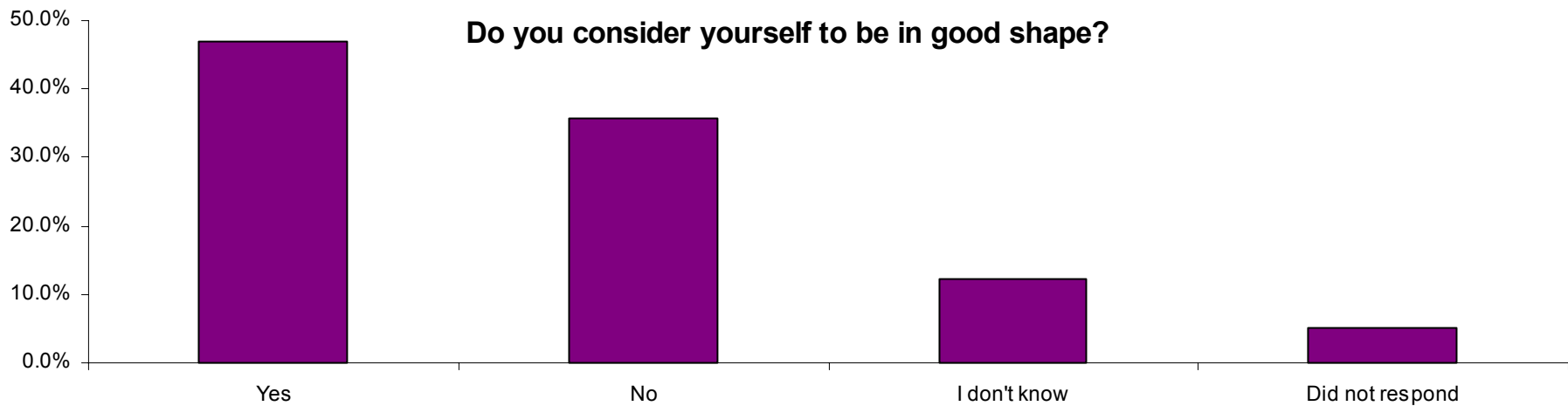
- *"I don't have insurance."*
- *"It takes too long to get an appointment."*
- *"The services I need aren't available."*
- *"I need a personal doctor."*
- *"Doctors don't understand me."*
- *"Doctors are always so rushed."*
- *"The service is poor."*

# Dietary Behaviors

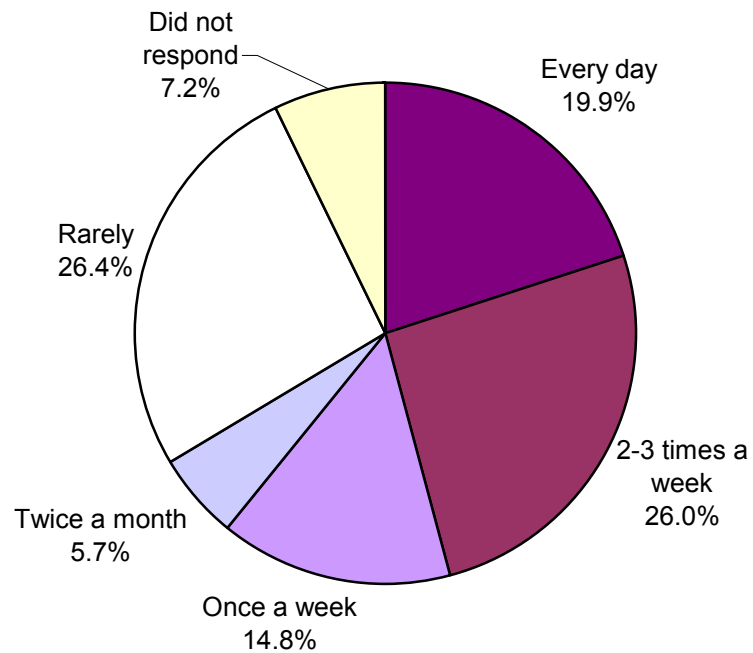


*Individuals who felt that they had a healthy diet were significantly more likely to consume 3 servings of fresh fruit / vegetables at least a few times a week and significantly less likely to consume fast food on a weekly basis.*

# Physical Activity



## How often do you exercise or do work that increases your heart rate?



Individuals who reported exercising everyday, were significantly more likely than those individuals who reported rarely exercising to:

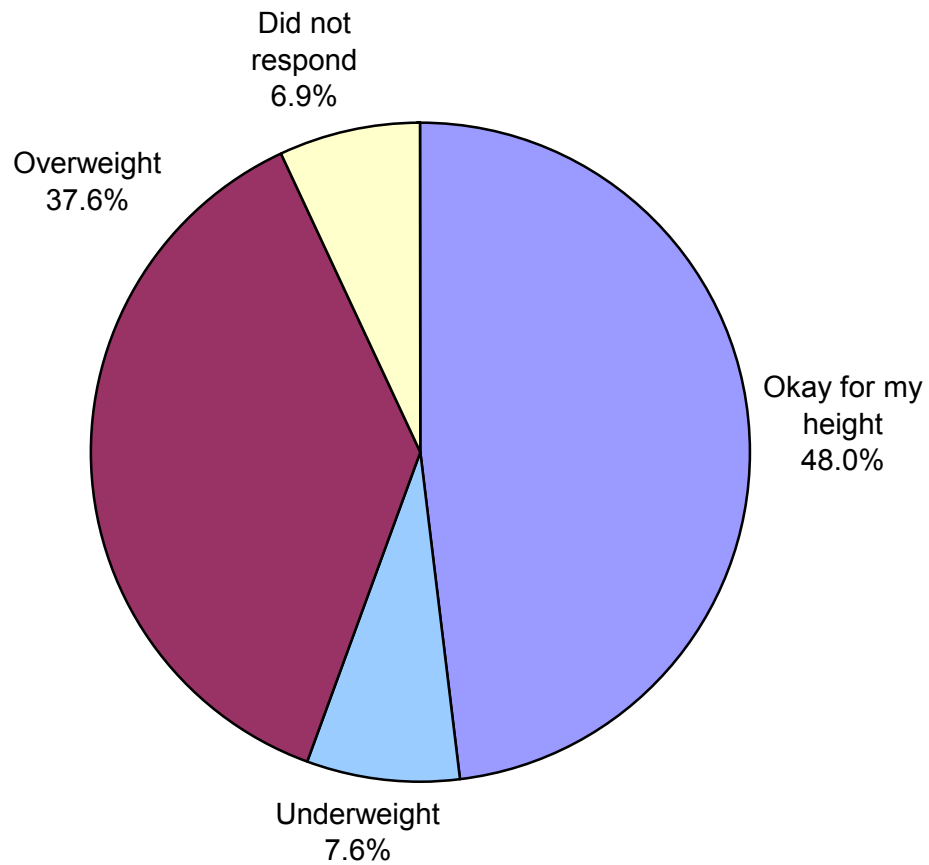
- *Eat at least 3 servings of fresh fruit / vegetables every day*
- *Consider themselves to be in good shape*
- *Be male*

**AND** significantly less likely than individuals who reported rarely exercising to:

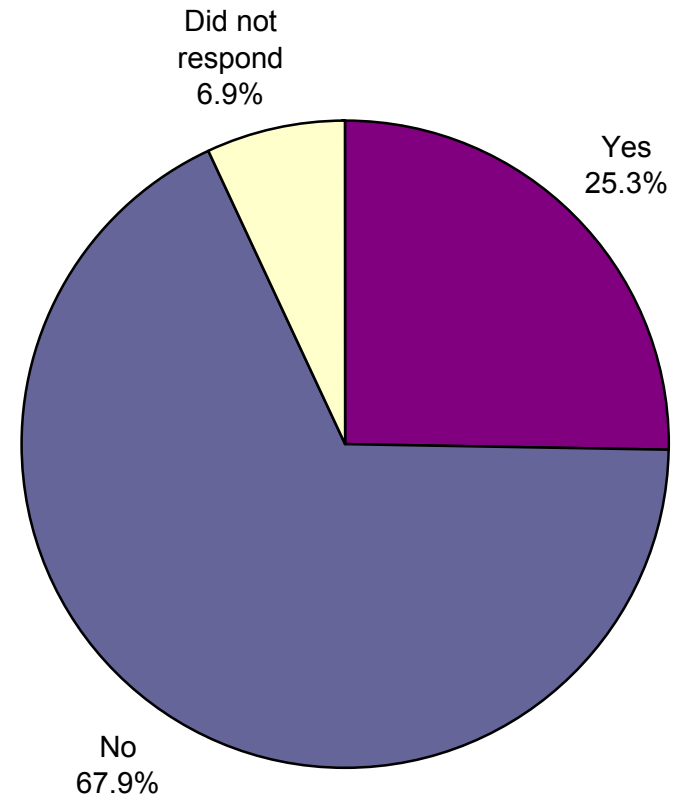
- *Consider themselves to be overweight*
- *View their weight as a barrier to doing things they want to do*

# Perceived Weight Status

Do you consider yourself to be ... ?



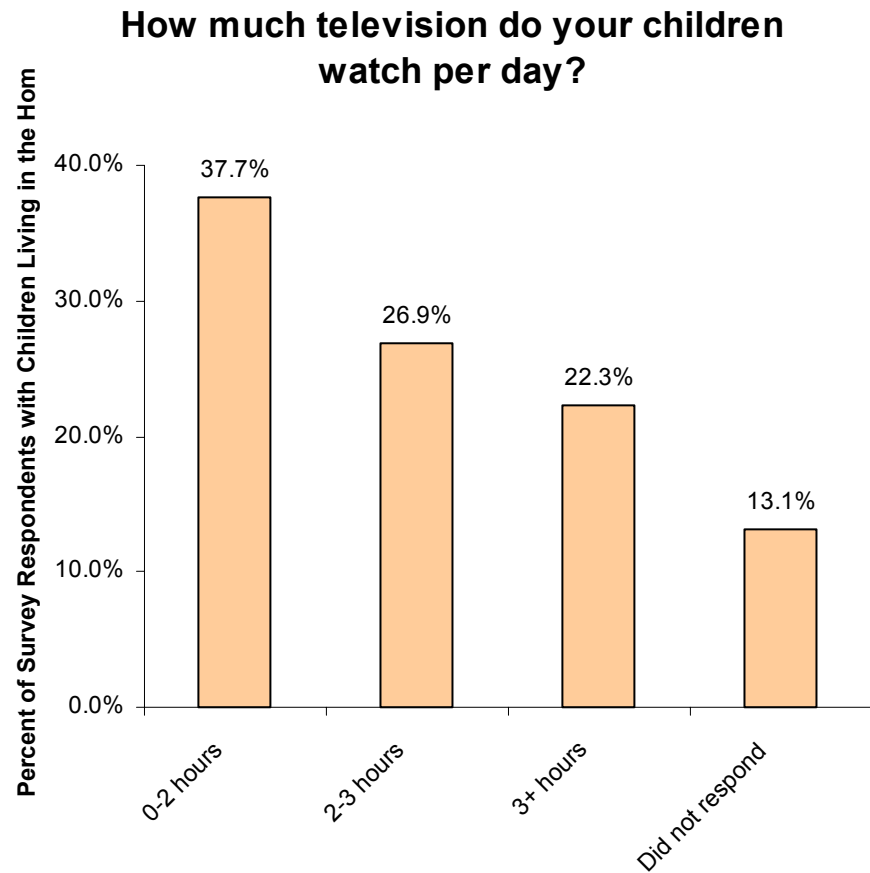
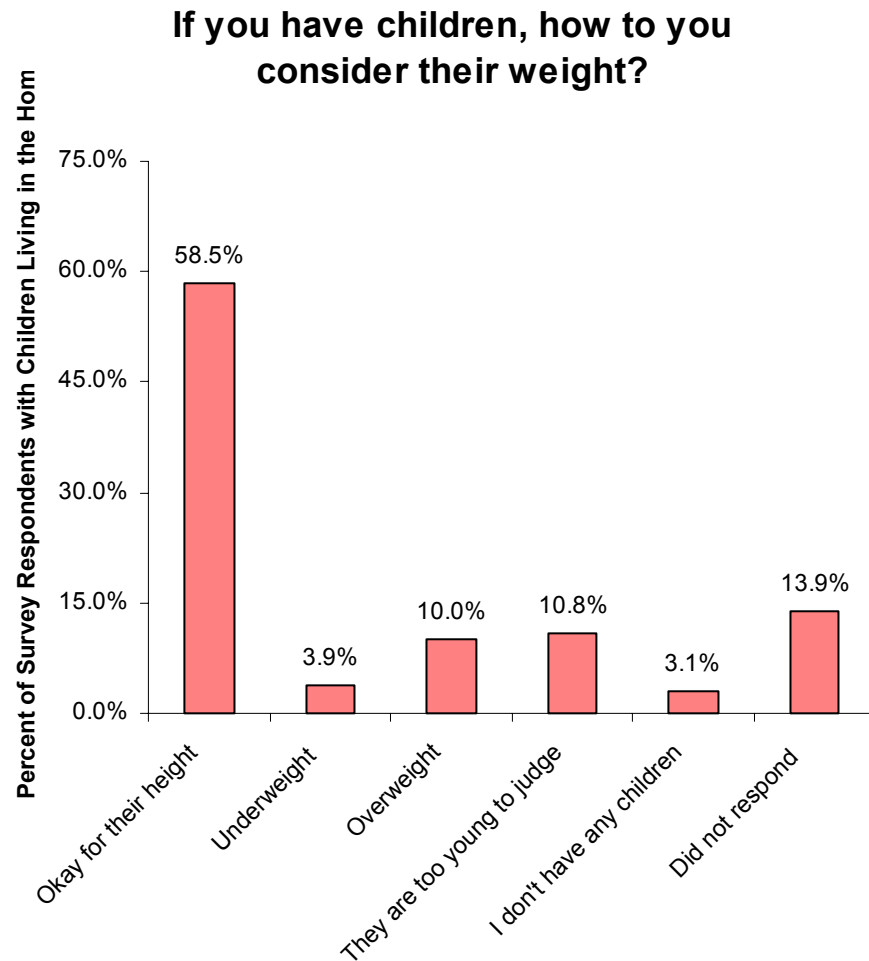
Does your weight keep you from doing things you want to do?



*Women were significantly more likely to consider themselves overweight and to feel that their weight restricts them from doing things they want to do than men.*

# Child Weight Status and Television Viewing

*Among questionnaire respondents who reported children living in their homes, the following was true:*

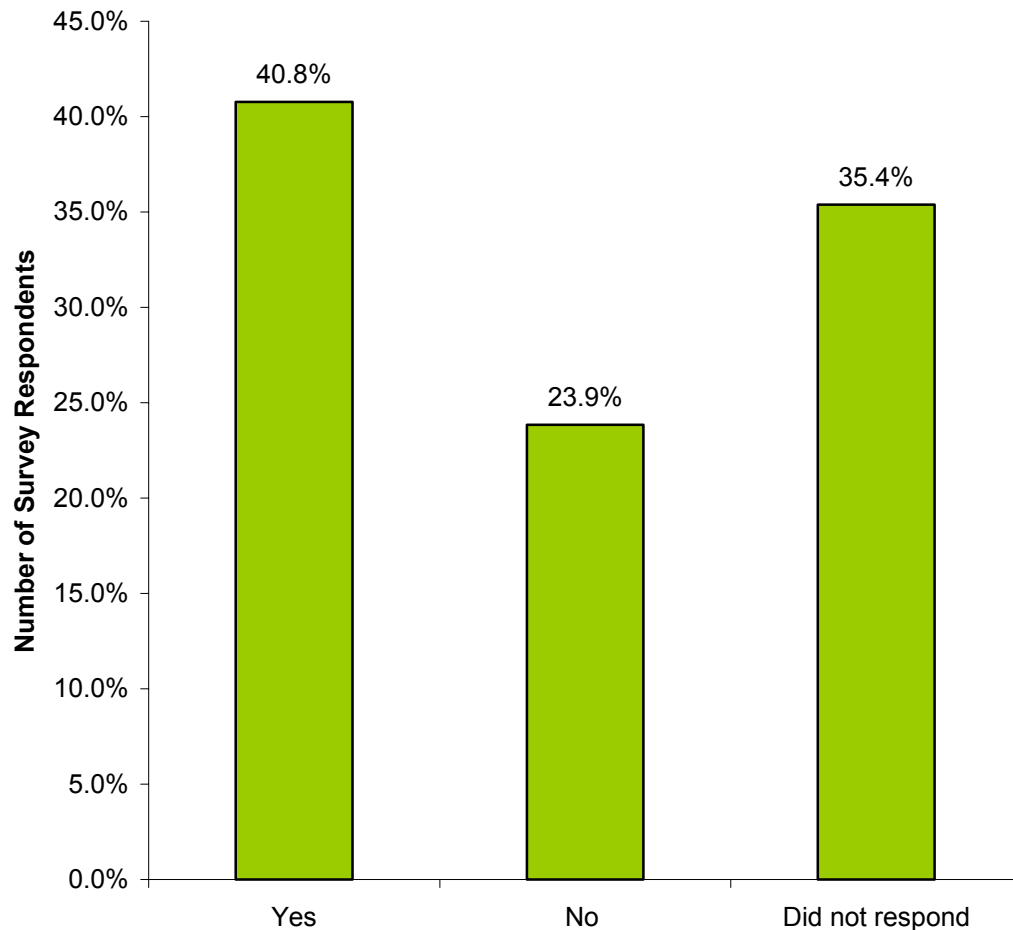


- *Questionnaire respondents who consider themselves to be overweight are more significantly likely to consider their children to be overweight than respondents who consider their weight to be “okay for their height.”*
- *There was NOT a significant association between overweight status and the amount of television that a child watches per day, nor was there a significant association between the amount of television that a child watches and whether that child participates in an exercise program.*

# Child Exercise and Physical Activity

*Among questionnaire respondents who reported children living in their homes, the following was true:*

**Do your children regularly participate in any exercise or fitness program?**

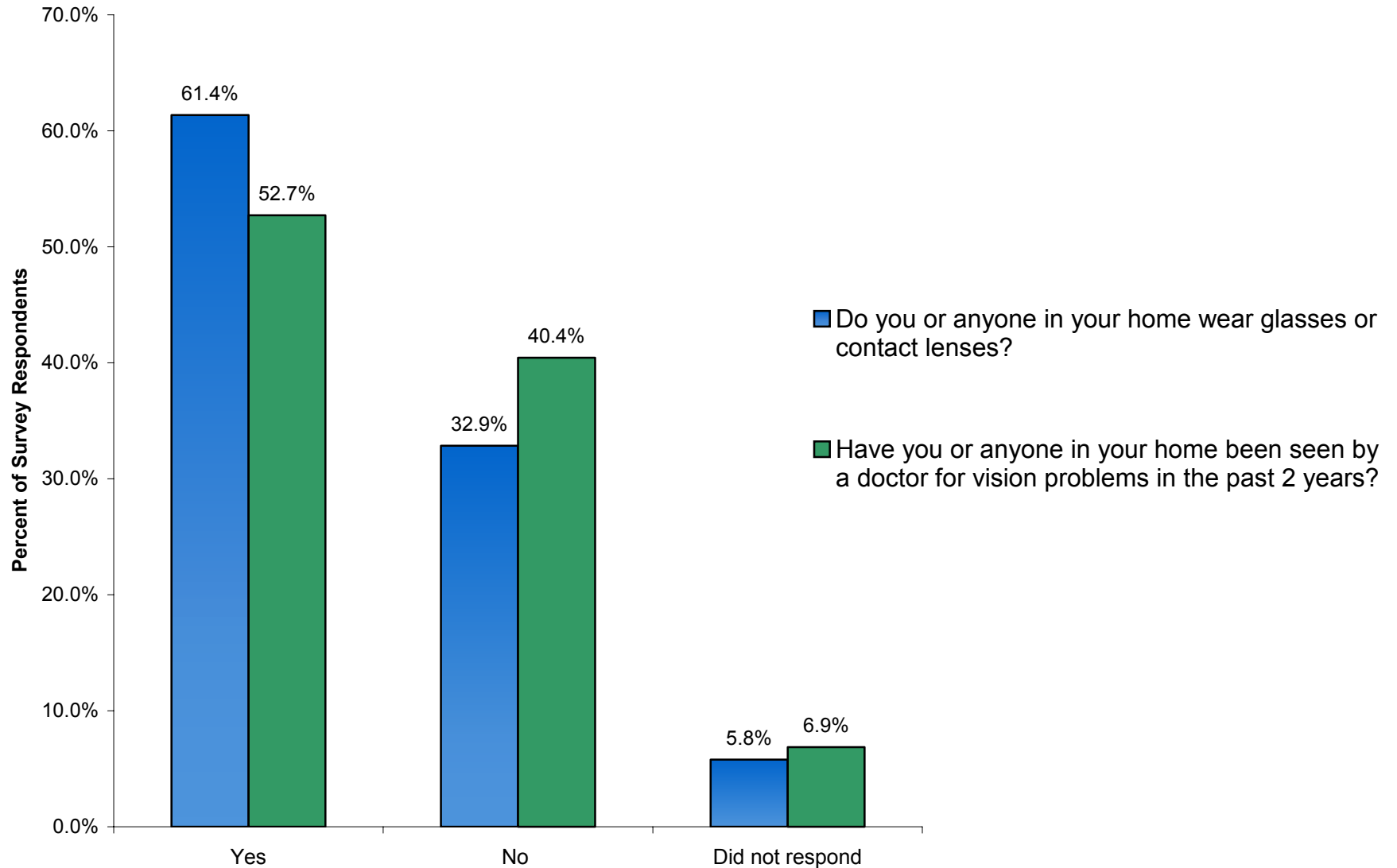


Questionnaire respondents who reported that their children regularly participate in an exercise or fitness program most frequently cited the following activities that their children participate in:

- School physical education classes (22 respondents)
- Basketball (9 respondents)
- Baseball / softball (7 respondents)
- Swimming (5 respondents)
- Ballet / dance (5 respondents)
- Running (4 respondents)
- Biking (4 respondents)



# Vision Problems and Coverage



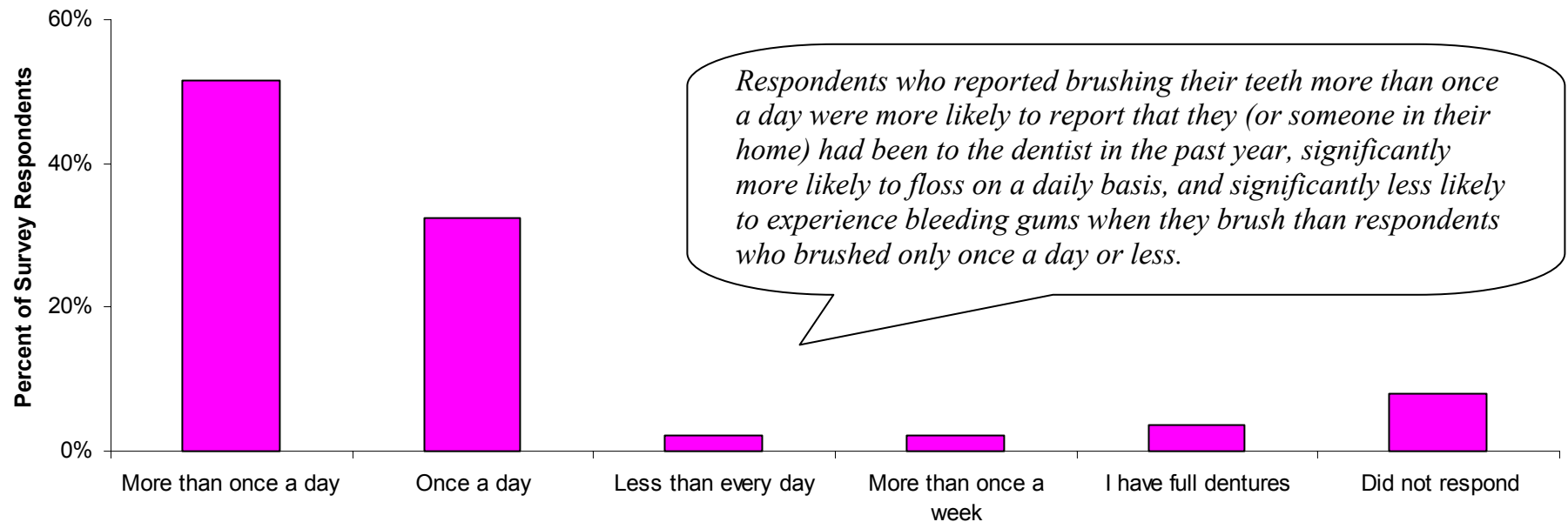
*Approximately 16% of adults surveyed reporting vision problems in their household in the past 2 years did not have any insurance to cover vision problems.*

# Dental Hygiene

Among all adults included in this questionnaire, approximately:

- 70% reported that they, or someone in their household had been to a dentist in the past year
- 63% reported having insurance to pay at least some of their dental costs
- 45% reported that their gums bleed when they brush their teeth at least sometimes
- 31% floss on a daily basis, and 28% floss and brush their teeth at least once a day
- 41.6% of respondents without full dentures brushed their teeth once a day or less

## How often do you brush your teeth?



# Experiences With Domestic Violence

More than 1/3 of all questionnaire respondents reported having ever experienced some form of domestic or relationship violence.

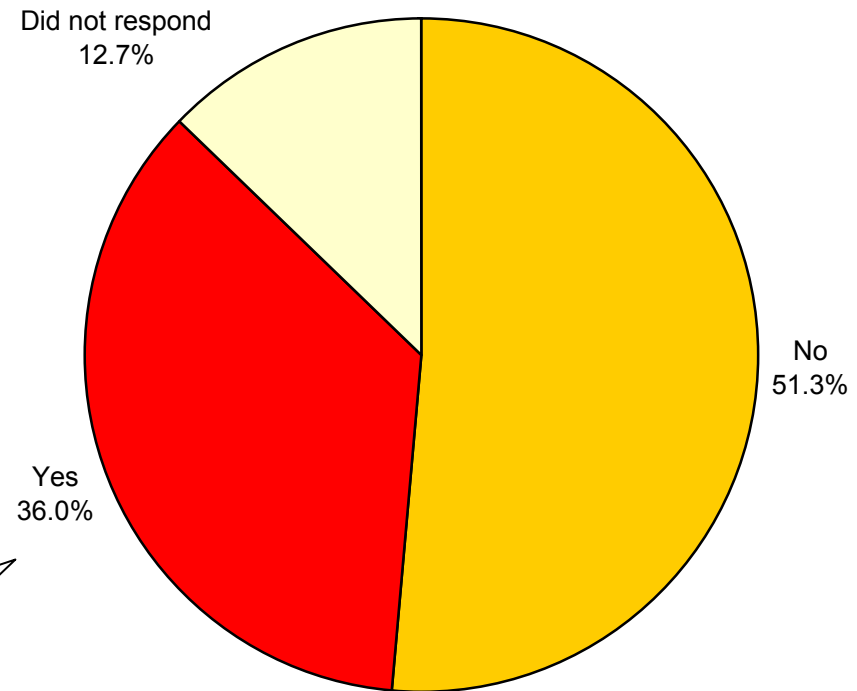
Those who reported having experienced domestic violence were significantly more likely than those who reported no such history to:

- Be female (69% of surveyed victims)
- Live in public housing (47% of surveyed victims)
- Be under the age of 30 (31% of surveyed victims)
- Be African-American (81% of surveyed victims)
- Use alcohol or drugs to cope with stress (45% of surveyed victims)

*Approximately 1/3 of all respondents who reported having experienced domestic violence reported being counseled or referred for services.*

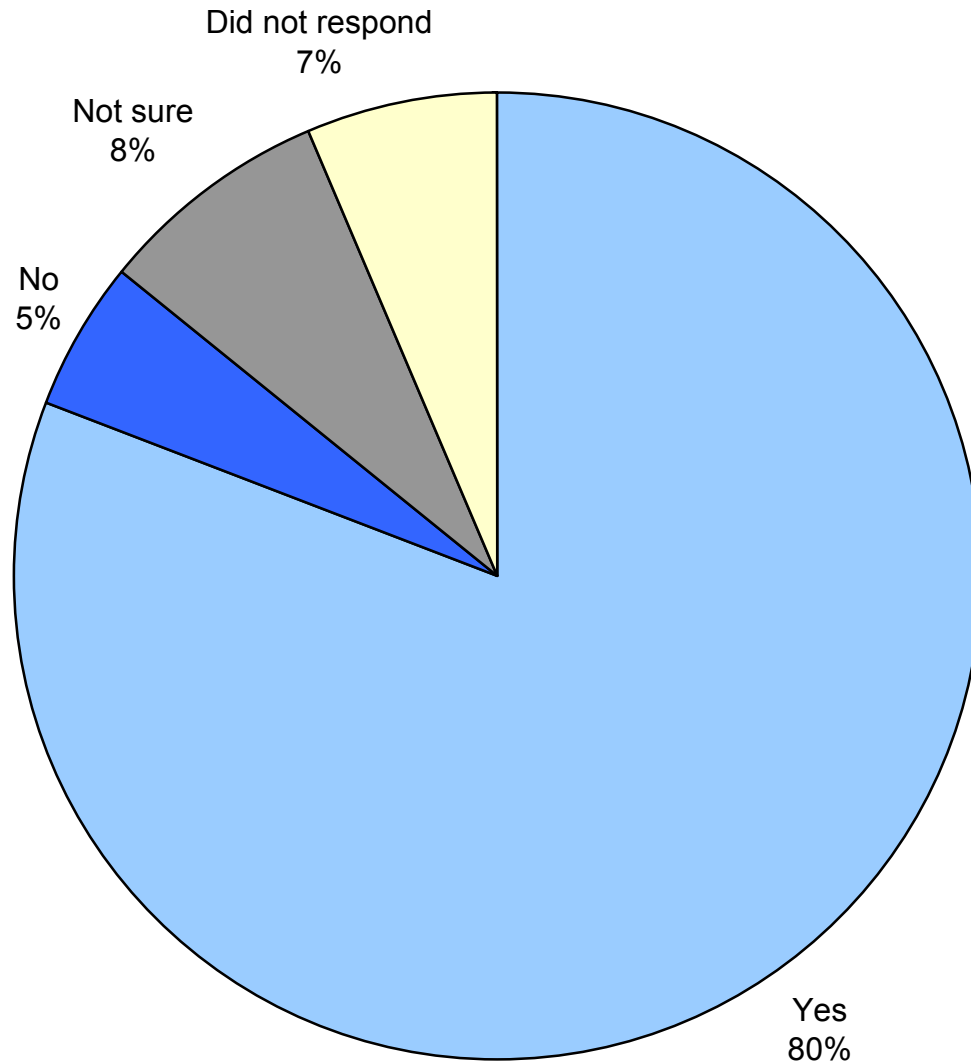
*Approximately 56% of those who were counseled or referred for services received extended care (19% of all victims.)*

## Have you ever experienced domestic or relationship violence?



# Neighborhood Safety / Community Crime and Violence

Do you feel safe in your neighborhood?

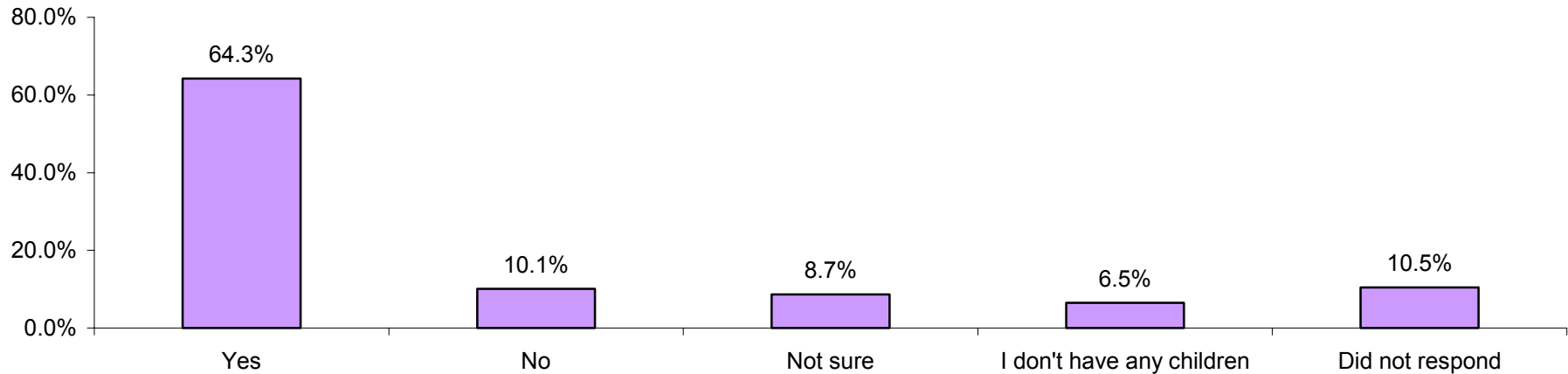


*Although more than 80% of questionnaire respondents said that they felt safe in their homes, 34% of respondents felt that crime and violence were among the most important concerns in the Marin City community.*

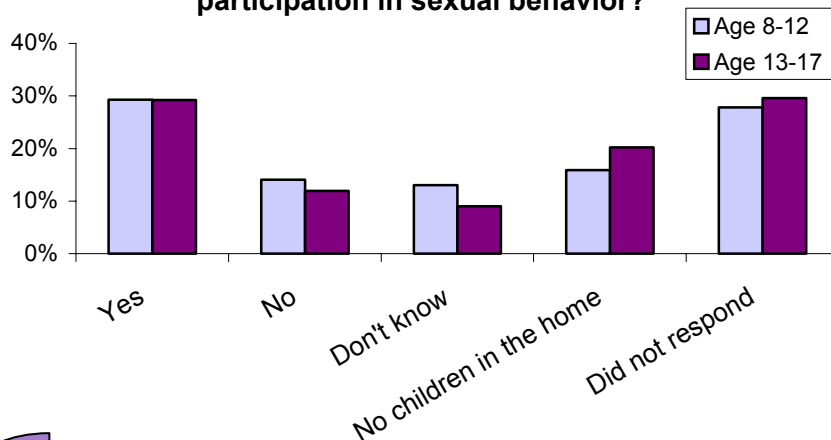
*Whether or not a respondent felt safe in their home had no influence on whether they felt that crime/violence was an important community concern.*

# Perceived Pressures To Children

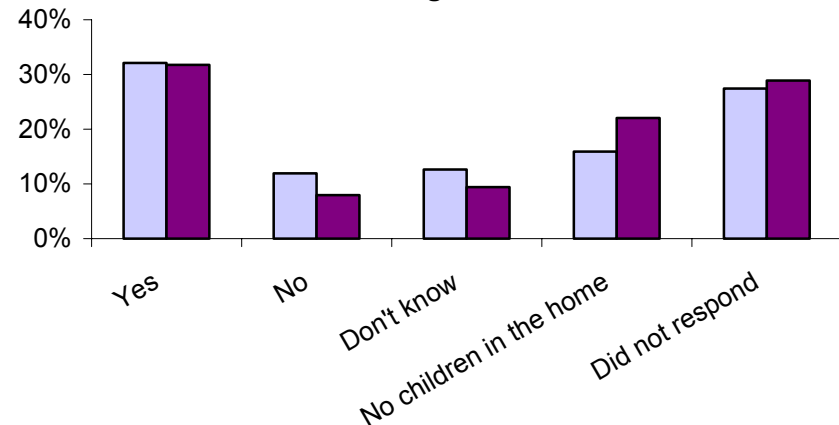
**Do you feel that children in your community are overexposed to sexual content or violence in music / TV / movies / advertising and video games?**



**Do you feel that your children are being or have been exposed to peer pressure around participation in sexual behavior?**



**Do you feel that your children are being or have been exposed to peer pressure around the use of drugs?**



*86% of questionnaire respondents who felt that their children were exposed to peer pressure around sexual behavior also felt that their children were exposed to peer pressure.*

# Alcohol, Street Drug, and Prescription Drug Use

*Approximately 30% of questionnaire respondents reported that they used alcohol, street drugs, or prescription drugs to cope with the stress in their lives.*

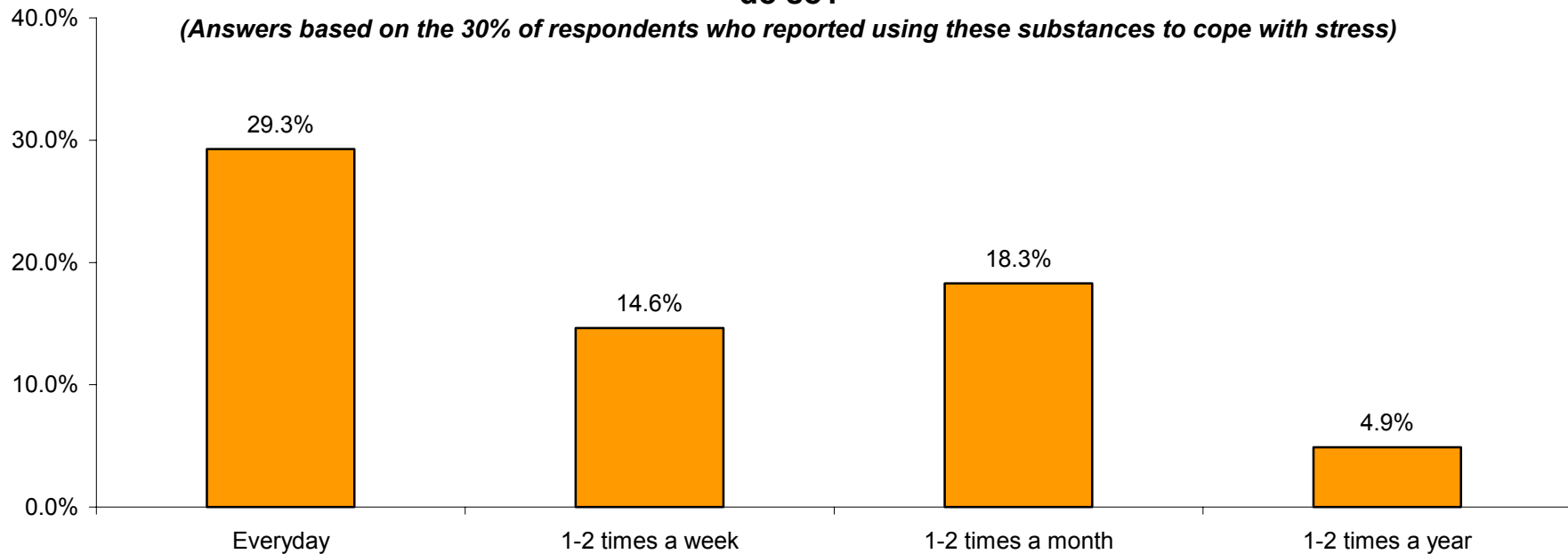
*Of this 30% ...*

- *55% reported ever using a combination of alcohol, street drugs, or prescription drugs*
- *23% felt that there were times when their use of alcohol or drugs was a problem*

*Adults who reported using these substances to cope with stress were most likely to use them on a daily basis*

**If you do use alcohol or drugs to cope with the stress in your life, how often do you do so?**

**(Answers based on the 30% of respondents who reported using these substances to cope with stress)**



## **Facilities Wanted in Marin City According to Questionnaire Respondents**

# Facilities Wanted in Marin City According to Questionnaire Respondents

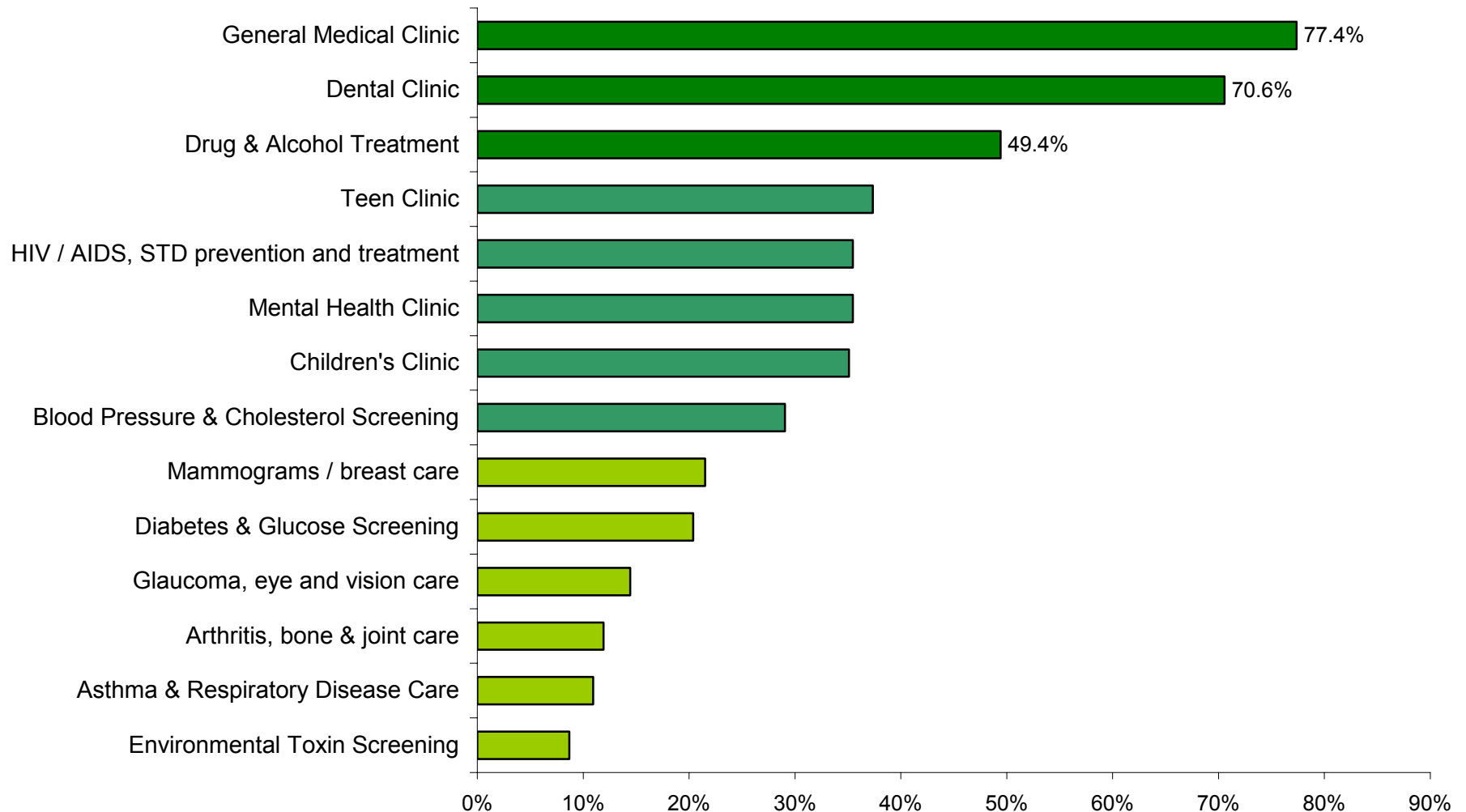
## *Key Points of Interest:*

- 77% of questionnaire respondents felt that a general medical clinic was an important health service that should be located in Marin City
- Greater than  $\frac{1}{3}$  of those surveyed felt that parenting skills, drug abuse, HIV /AIDS and sexually transmitted diseases, and crime / violence were among the most important health problems facing their community
- 79% of surveyed Marin City adults reported that they were registered to vote
- $\frac{2}{3}$  of those surveyed were optimistic about the effectiveness of this survey in bringing more health services to their community



# Health Services Requests Among Questionnaire Respondents

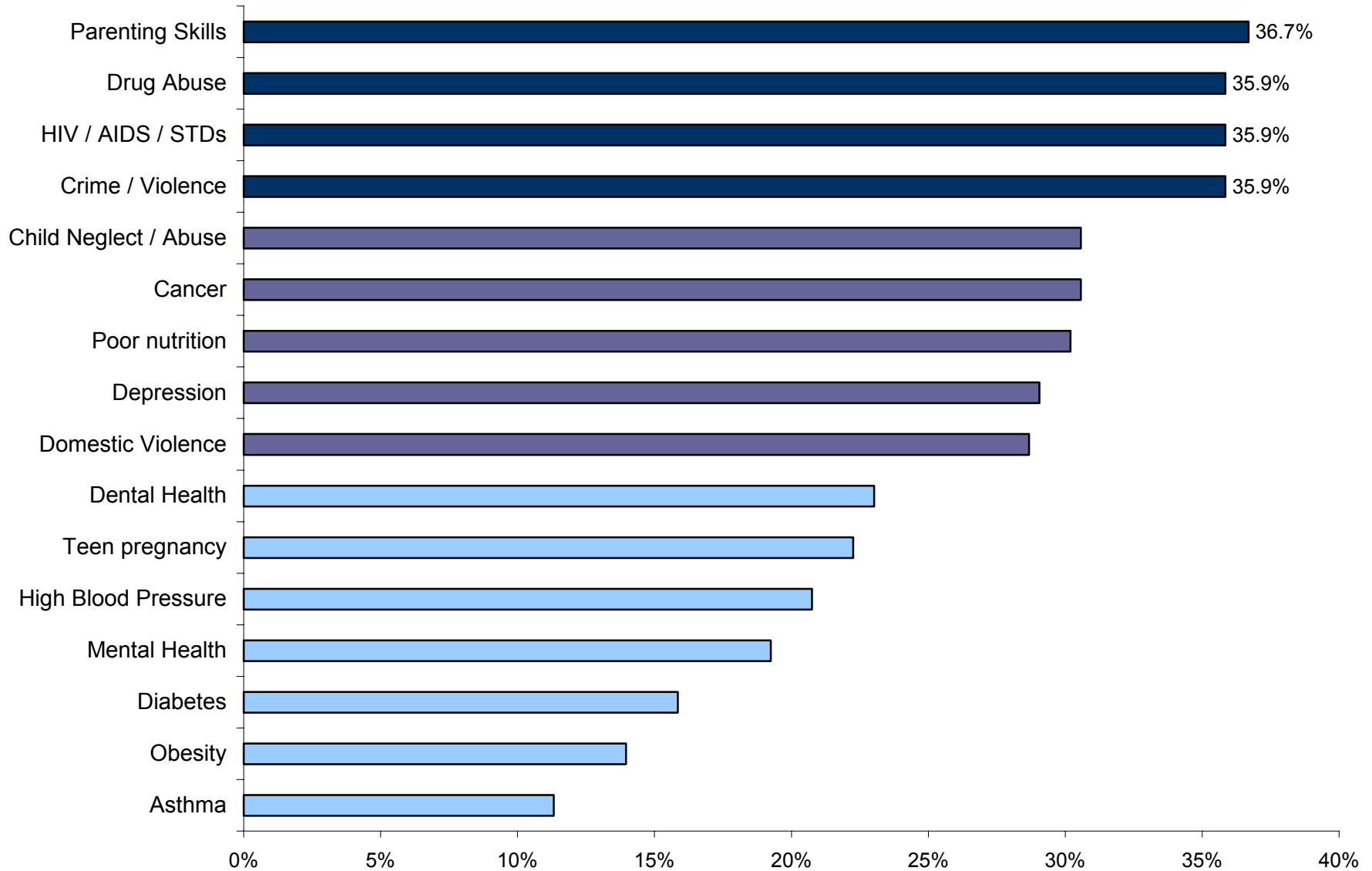
What are the most important health services that should be located in Marin City?



*Approximately ½ of those surveyed felt that a general medical clinic, a dental clinic, and a drug and alcohol treatment facility were the most important health services that should be located in Marin City.*

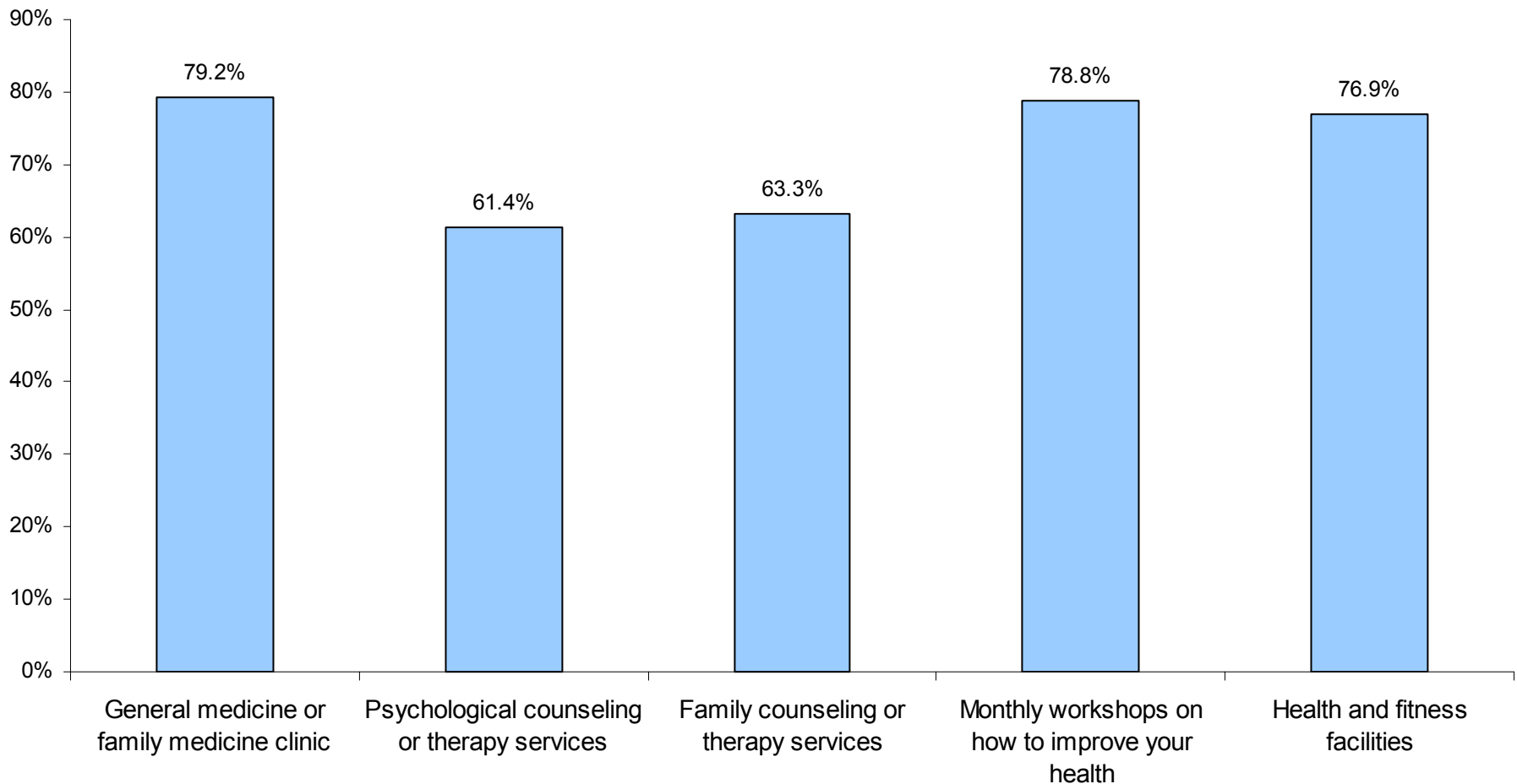
# Health Concerns Among Questionnaire Respondents

What do you think are the most important community health problems?



# Market for Proposed Services in Marin City

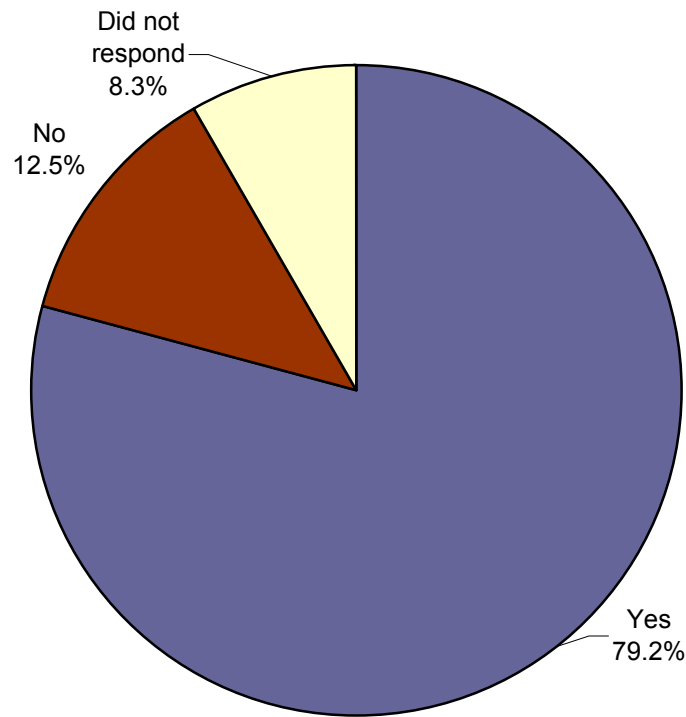
If the following facilities / services were available in Marin City, would you or anyone in your home use them?



*66% of questionnaire respondents felt that they would be more likely utilize these services or facilities if childcare was available on site.*

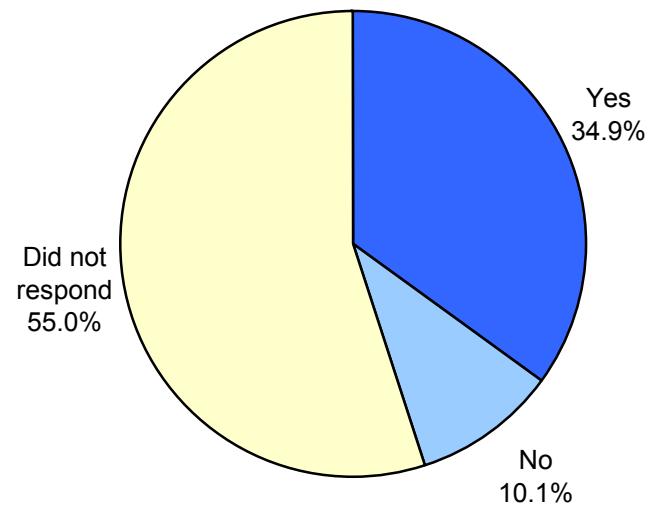
# Community Political Involvement

## Are you registered to vote?



Although almost 80% of questionnaire respondents (aged 18+) were registered voters, only 35% of surveyed voters reported that they voted in the most recent district election.

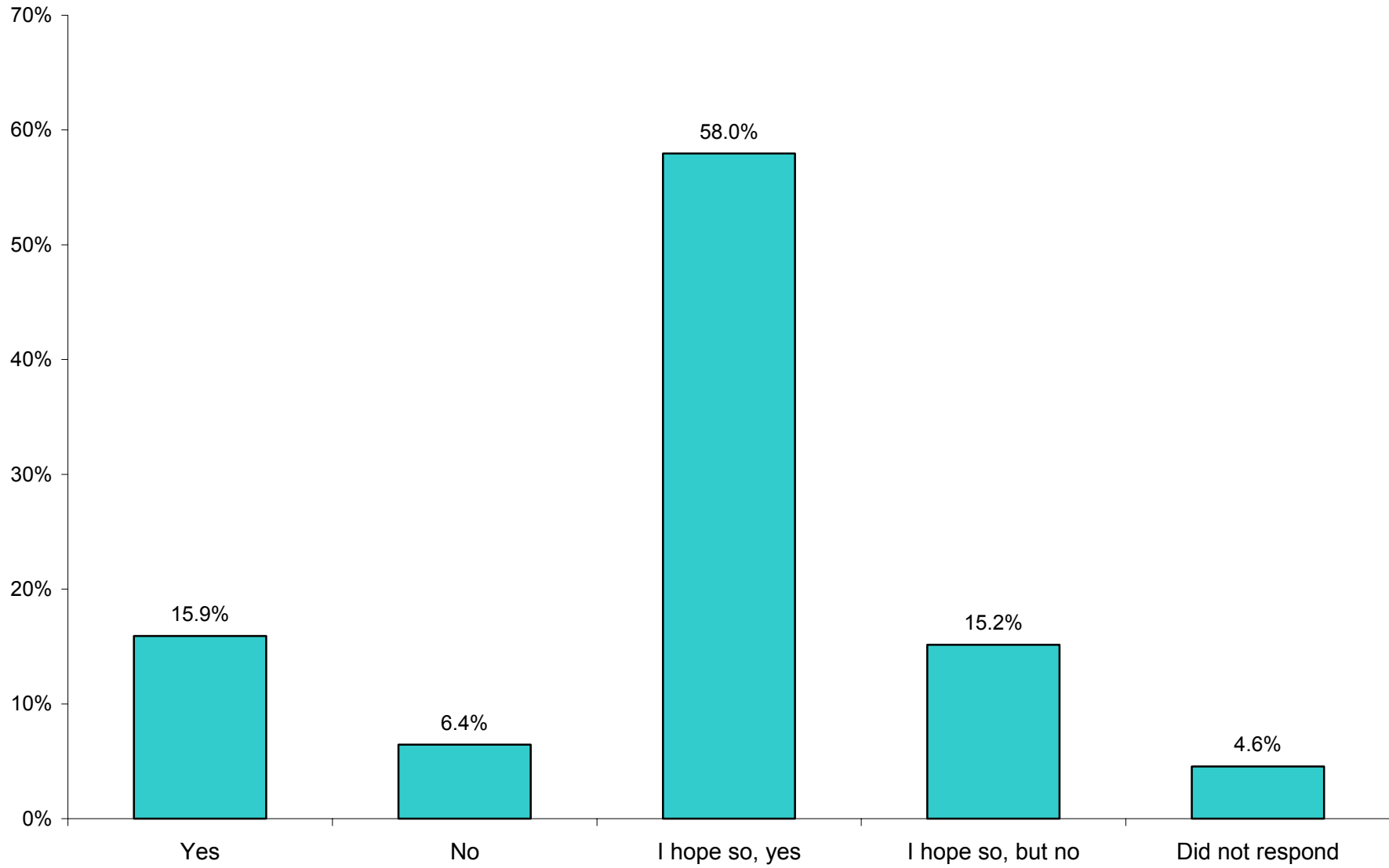
## If you are a registered voter, did you vote in the last district election?



- 74% of surveyed men, and 82% of surveyed women were registered voters
- Surveyed adults over the age of 30 were significantly more likely to be registered voters than respondents between the ages of 18-29 (82% vs. 69%)
- 26.5% of questionnaire respondents correctly identified Annette Rose as their district supervisor
- 21.2% of questionnaire respondents correctly identified Marin City as being in district #3

# Perceived Survey Capability Among Respondents

Do you think your participation in this questionnaire will bring more health services into Marin City?



# Questionnaire

# MARIN CITY COMMUNITY HEALTH SURVEY

Please feel free to answer all questions. We do not need/want your name nor your specific address on this survey. While some of the questions are very personal, we need your cooperation and help in evaluating what health services are available, how well or poorly the community is served and what services are needed. The survey is specifically designed to reflect the needs of the community.

## Participant Data

1) Please circle the neighborhood in which you now live. *Please circle one only.*

Ridgeway Apartments	Headlands I or II	Public Housing	Townhouses
Shelter Hill/Miwok	Boat Homes	Ponderosa Estates	Pole Homes
Oduduaw Village	Braun Court	Oak Knolls	Co-op Apts.

2) How long have you lived in the survey area? *Please check one only.*

Less than 3 years \_\_\_\_\_ 3 - 5 years, \_\_\_\_\_ 6 - 10 years \_\_\_\_\_  
11 - 20 years, \_\_\_\_\_ 21 -30 years, \_\_\_\_\_ more than 30 years, \_\_\_\_\_

3) Including you, how many people live in your home? \_\_\_\_\_.

a. please list the age and sex of all the children in your home. \_\_\_\_\_ male \_\_\_\_\_ female  
b. please list the age and sex of all the adults in your home. \_\_\_\_\_ male \_\_\_\_\_ female

4) Are you employed : \_\_\_\_yes \_\_\_\_no.

a. If yes, \_\_\_\_full time \_\_\_\_part time \_\_\_\_self employed

b. If self employed, do you work out of your home: \_\_\_\_yes \_\_\_\_no.

c. If unemployed, how long: \_\_\_\_less than 6 mos. \_\_\_\_7mos.- 1yr. \_\_\_\_more than 1 yr.

5) What is your total household income from all sources? *Please check one only.*

\_\_\_\_Less than \$8,980. \_\_\_\_\$8,981 - \$12,120. \_\_\_\_\$12,121 - \$15,260 \_\_\_\_\$15,261 - \$18,400.  
\_\_\_\_\$18,401.- \$21,540. \_\_\_\_\$21,541.-\$24,680. \_\_\_\_\$24,681.- \$27,820. \_\_\_\_\$27,821.- \$30,960.  
\_\_\_\_\$30,961.- \$49,999. \_\_\_\_\$50,000.-\$74,999. \_\_\_\_\$75,000.- \$99,999. \_\_\_\_above \$100,000.

6) What language(s) are spoken in your home? \_\_\_\_\_

7) What racial and/or ethnic group do you identify with. *Please check one only.*

____Black /African American	____Native American
____Latino or Hispanic	____Middle Eastern
____White/European American	____Eastern European/Russian
____Asian/Pacific Islander	____African/West Indian
Other _____	Mixed _____

8) How old are you \_\_\_\_\_

9) *Please check all that apply to you:*

sex: \_\_\_\_\_male \_\_\_\_\_female \_\_\_\_\_transgendered  
marital status: \_\_\_\_\_single \_\_\_\_\_married \_\_\_\_\_domestic partner \_\_\_\_\_never married  
\_\_\_\_\_widowed \_\_\_\_\_divorced \_\_\_\_\_separated \_\_\_\_\_engaged  
sexual orientation: \_\_\_\_\_straight \_\_\_\_\_gay/lesbian \_\_\_\_\_bisexual \_\_\_\_\_celibate

## **Facilities Access and Use**

1) In the past 12 months, what health services have you used? *Please check all that apply:*

**Medical Clinic:**      Pregnancy\_\_\_      Dental\_\_\_      Vision\_\_\_      Glaucoma\_\_\_      Heart/Cardiac\_\_\_  
Diabetes\_\_\_      HIV/AIDS\_\_\_      Blood Pressure\_\_\_      OB/GYN\_\_\_      Asthma\_\_\_  
School Immunization\_\_\_      Back Care\_\_\_      Flu Shot\_\_\_      Arthritis/Joints\_\_\_  
Chiropractor\_\_\_      Routine check-up\_\_\_      Work injury\_\_\_      Back Care\_\_\_  
**Emergency Room:**      Auto Accident\_\_\_      Accident in the home\_\_\_      Sudden illness\_\_\_  
Other (specify) \_\_\_\_\_  
**Mental health:**      Family/Psychological counseling\_\_\_      Post Partum Depression\_\_\_  
Therapy(senior)\_\_\_      Therapy(adult)\_\_\_      Therapy(teen)\_\_\_      Therapy(child)\_\_\_  
Anger Management\_\_\_      Stress Management\_\_\_      Grief/Trauma Counseling\_\_\_  
**Not seen in past 12 months**\_\_\_\_\_      **Other(specify):**\_\_\_\_\_

2) Is there a particular doctor's office, clinic, health center, or other place that you usually go to if you are sick or need advice about your health? *Please circle all that apply.*

- |                                  |   |
|----------------------------------|---|
| a. Clinic in Marin City          | h. Alternative health practitioner(accupuncture, massage) |
| b. Clinic in San Rafael          | i. Chiropractor   |
| c. Marin General Hospital        | j. Private clinic/doctor outside Marin City               |
| d. Kaiser in San Rafael          | k. Planned Parenthood                                     |
| e. Kaiser in San Francisco       | l. Midwife  |
| f. Clinic in San Francisco       | m. Family or Psychological Counseling Center/ Therapist   |
| g. Clinic in Marin [ Greenbrae ] | Other (specify)_____                                      |

3) Are you currently covered by a health insurance plan which pays for any part of your medical, vision, dental, counseling or therapy bills.

Please circle one answer for medical, one for dental, one for vision, one for counseling and one for therapy.

Medical	a. yes	b. no	c. don't know
Dental	a. yes	b. no	c. don't know
Vision	a. yes	b. no	c. don't know
Counseling	a. yes	b. no	c. don't know
Therapy	a. yes	b. no	c. don't know

4) If yes, what type of insurance is it?

\_\_\_Medi-Cal    \_\_\_Medicare    \_\_\_Healthy Families    \_\_\_HMO    \_\_\_PPO    \_\_\_Champus  
\_\_\_Employer provided    \_\_\_Self-pay    Other:\_\_\_\_\_

5) Have you or any one in you home ever canceled, missed or put off **medical** treatment or services due to any of the following reasons. *Please circle the (4) most important reasons.*

- Lack of transportation
- Child care problems
- Lack of medical coverage or insurance
- Cost of treatment
- Lack of availability of services in the Marin City community
- Lack of availability of racially compatible care providers
- Lack of availability of care providers who speak your language.



6) Have you or any one in your home ever canceled, missed or put off **dental** treatment or services due to any of the following reasons. *Please circle the four (4) most common reasons.*

- a. Lack of transportation
- b. Child care problems
- c. Lack of medical coverage or insurance
- d. Cost of treatment
- e. Lack of availability of services in the Marin City community
- f. Lack of availability of racially compatible care providers
- g. Lack of availability of care providers who speak your language.

7) Have you or any one in your home ever canceled, missed or put off **Family counseling or therapy** services due to any of the following reasons. *Please circle the (4) most important reasons.*

- a. Lack of public transportation
- b. Child care problems
- c. Lack of medical coverage or insurance
- d. Cost of treatment
- e. Lack of availability of services in the Marin City community
- f. Lack of availability of a racially compatible therapist or care provider
- g. No therapist who understands your cultural background.
- h. Lack of availability of care providers who speak your language.

8) Have you or any one in your home ever canceled, missed or put off **Psychological counseling or therapy** services due to any of the following reasons. *Please circle the (4) most important reasons.*

- a. Lack of public transportation
- b. Child care problems
- c. Lack of medical coverage or insurance
- d. Cost of treatment
- e. Lack of availability of services in the Marin City community
- f. Lack of availability of a racially compatible therapist or care provider
- g. No therapist who understands your cultural background.
- h. Lack of availability of care providers who speak your language.

9) Where do you now go for medical care: \_\_\_\_\_

10) Is the care that you receive meeting your needs? \_\_\_yes \_\_\_no.

11) If no, please state why \_\_\_\_\_  
\_\_\_\_\_

12) Do you think that you have a healthy diet? \_\_\_yes \_\_\_no \_\_\_don't know.

13) How often do you eat 3 or more servings of fresh vegetables or fruit?  
\_\_\_every day \_\_\_a few times a week \_\_\_a few times a month \_\_\_not at all.

14) How often do you eat "fast foods" like burgers & fries, fried chicken or fried toco's  
\_\_\_every day \_\_\_a few times a week \_\_\_a few times a month \_\_\_I don't eat these foods

15) Are you or anyone in your home a vegetarian? \_\_\_yes \_\_\_no.

16) Do you consider yourself to be in good shape? \_\_\_yes \_\_\_no \_\_\_don't know.

- 17) Do you exercise or do work that increases your breathing and makes your heart beat faster:  
☐ every day ☐ 2-3 times a week ☐ once a week ☐ twice a month ☐ rarely
- 18) Do you consider your weight: ☐ O.K. for my height ☐ under weight ☐ over weight.
- 19) Does your weight keep you from doing things that you want to do? ☐ yes ☐ no.
- 20) If you have a child or children, do you consider their weight: ☐ O.K. for their height,  
☐ under weight ☐ over weight ☐ they are too young to judge ☐ I don't have any children.
- 21) How much television do your children watch per day: ☐ 0-2 hours ☐ 2-3 ☐ 3+
- 22) Do you regularly participate in any exercise or fitness program: ☐ yes ☐ no.  
a. if yes, what is it: \_\_\_\_\_
- 23) Do your children regularly participate in any exercise or fitness program or event:  
a. if yes, what is it: \_\_\_\_\_  
b. how many are girls ☐ and what are their ages \_\_\_\_\_  
c. how many are boys ☐ and what are their ages \_\_\_\_\_
- 24) Do you or any one in your home wear glasses or contact lens for vision correction?  
☐ yes ☐ no
- 25) Have you or any one in your home been seen by a doctor for vision problems in the past two years?  
☐ yes ☐ no
- 26) Have you or any one in your home been seen by a dentist in the past year?  
☐ yes ☐ no
- 27) How often do you brush your teeth? ☐ more than once a day ☐ once a day  
☐ less than every day ☐ more than once a week ☐ I have full dentures
- 28) Do your gums bleed when you brush your teeth? ☐ every time ☐ sometimes ☐ not at all
- 29) Do you floss your teeth: ☐ every day ☐ once a week ☐ once a month ☐ not at all.
- 30) Today, is your life more or less stressful than it was a year ago? ☐ more ☐ less ☐ the same.
- 31) Could you use some help to raise your child/children more effectively?  
☐ yes ☐ no ☐ sometimes.
- 32) Do you believe that you have healthy relationships with the people in your home?  
a. parent/child ☐ yes ☐ no ☐ I need help  
b. parent/teen ☐ yes ☐ no ☐ I need help  
c. with your spouse ☐ yes ☐ no ☐ I need help  
d. with other adults ☐ yes ☐ no ☐ I need help
- 33) Have you ever experienced domestic or relationship violence: ☐ yes ☐ no.  
a. if yes, were you counseled or referred for services/benefits ☐ yes ☐ no.

- b. if yes, was there any follow up or extended care or services \_\_\_\_yes \_\_\_\_no.
- 34) Do you feel safe in your home? \_\_\_\_yes \_\_\_\_no \_\_\_\_not sure
- 35) Do you feel that the children in your community are over exposed to sexual content or violence in music / TV / movies / advertising and video games? \_\_\_\_yes \_\_\_\_no \_\_\_\_not sure \_\_\_\_no children.
- 36) Do you think that your children (8 to 12), are being or have been exposed to peer pressure around the use of drugs. \_\_\_\_yes \_\_\_\_no \_\_\_\_don't know \_\_\_\_no children in home..
- 37) Do you think that your children (8 to 12), are being or have been exposed to peer pressure around participation in sexual behavior. \_\_\_\_yes \_\_\_\_no \_\_\_\_don't know \_\_\_\_no children in home.
- 38) Do you think that your teen(s) (13-17) are being or have been exposed to peer pressure around the use of drugs. \_\_\_\_yes \_\_\_\_no \_\_\_\_don't know \_\_\_\_no teens in home.
- 39) Do you think that your teen(s) (13-17), are being or have been exposed to peer pressure around participation in sexual behavior. \_\_\_\_yes \_\_\_\_no \_\_\_\_don't know \_\_\_\_no children in home.
- 40) Have you discussed the use of drugs and alcohol with your: *Please check all that apply.*  
 \_\_\_\_children aged 6-9 \_\_\_\_children aged 10 - 12 \_\_\_\_teens,13 - 15 \_\_\_\_teens, 16 - 19.
- 41) Have you discussed peer pressure and sexual behavior with your: *Please circle all that apply.*  
 a. children aged 6-9 b. children aged 10 - 12 c. teens,13 - 15 d. teens, 16 - 19.
- 42) Do you use alcohol, street drugs or prescription drugs to help you cope with the stress in your life?  
 \_\_\_\_yes \_\_\_\_no
- a. if yes, do you ever take a combination of these substances? \_\_\_\_yes \_\_\_\_no
- b. if yes, how often: \_\_\_\_every day \_\_\_\_1-2 times a week \_\_\_\_1-2 times a month \_\_\_\_1-2 times a yr.
- c. if yes, is your use of alcohol or drugs a problem: \_\_\_\_yes \_\_\_\_no \_\_\_\_sometimes.
- 43) Have you ever benefited from any of the following: *Please check all that apply.*  
 a. psychological counseling or therapy? \_\_\_\_yes \_\_\_\_no.  
 b. family counseling or therapy? \_\_\_\_yes \_\_\_\_no.  
 c. individual therapy \_\_\_\_yes \_\_\_\_no.  
 d. anger management \_\_\_\_yes \_\_\_\_no.  
 e. parenting classes or workshop \_\_\_\_yes \_\_\_\_no.
- 44) Is there a child or teen in your home, who could benefit from therapy: \_\_\_\_yes \_\_\_\_no.  
 a. if yes, \_\_\_\_male \_\_\_\_female \_\_\_\_age
- 45) Is there now a child in your home who is currently on juvenile probation? \_\_\_\_yes \_\_\_\_no  
 a. if yes, \_\_\_\_male \_\_\_\_female \_\_\_\_age
- 46) Has a child in your home ever been expelled or suspended from school? \_\_\_\_yes \_\_\_\_no  
 a. if yes, \_\_\_\_male \_\_\_\_female \_\_\_\_age at time of suspension or expelling.  
 b. if yes, were you offered any counseling services, \_\_\_\_yes \_\_\_\_no  
 c. if services were offered, did you use them, \_\_\_\_yes \_\_\_\_no  
 d. if you used the services, were they helpful \_\_\_\_yes \_\_\_\_no.

## MARIN CITY COMMUNITY HEALTH SURVEY

### **Facility and Services Needed**

1) What are the five most important health services that should be located in Marin City?

Please circle five (5) only.

- |                                 |   |
|---------------------------------|---|
| a. General Medical Clinic       | h. Blood Pressure & Cholesterol Screening |
| b. Dental clinic                | i. Glaucoma, eye and vision care          |
| c. Mammograms/breast care       | j. Children's Clinic                      |
| d. Drug & Alcohol Treatment     | k. HIV/AIDS, STD prevention & treatment   |
| e. Arthritis, bone & joint care | l. Teen Clinic                            |
| f. Mental Health Clinic         | m. Asthma & Respiratory Disease Care      |
| g. Diabetes & Glucose Screening | n. Environmental Toxin Screening          |

other (specify) : \_\_\_\_\_

2) What do you think are the (5)

3) five most important community health problems:

- |                   |                  |                     |                        |
|-------------------|------------------|---------------------|------------------------|
| a. Cancer         | e. HIV/AIDS/STDs | i. Depression       | m. Domestic Violence   |
| b. Crime/Violence | f. Obesity       | j. Diabetes         | n. Child Neglect/Abuse |
| c. Drug Abuse     | g. Asthma        | k. Mental Health    | o. Teen pregnancy      |
| d. Poor nutrition | h. Dental Health | l. Parenting Skills | p. High Blood Pressure |

3) If a general medicine or family medicine clinic were located in Marin City, would you or any one in your home use it? \_\_\_\_yes \_\_\_\_no

4) If psychological counseling or therapy services were located in Marin City, would you or any one in your home use them? \_\_\_\_yes \_\_\_\_no

5) If family counseling or therapy services were located in Marin City, would you or any one in your home use them? \_\_\_\_yes \_\_\_\_no

6) If monthly workshops were offered in your community on how to improve your health, would you attend at least one? \_\_\_\_yes \_\_\_\_no

7) If health and fitness facilities were available in Marin City, would you use them? \_\_\_\_yes \_\_\_\_no.

8) Would you be more likely to attend a workshop or use a health / fitness facility if child care was available on site? \_\_\_\_yes \_\_\_\_no

9) Are you registered to vote, \_\_\_\_yes \_\_\_\_no, and did you vote in the last District Election \_\_\_\_yes \_\_\_\_no.

10) Marin City is in which district : \_\_\_\_#1 \_\_\_\_#2 \_\_\_\_#3 \_\_\_\_#4 \_\_\_\_#5.

11) Do you know the name of your District Supervisor? \_\_\_\_\_

12) Do you think your participation in this survey will bring more health services into Marin City?

a. \_\_\_\_yes \_\_\_\_no \_\_\_\_I hope so, yes \_\_\_\_I hope so, but no.

**Thank - you very much for your valuable participation!**